

Before Starting the CoC Application

The CoC Consolidated Application consists of three parts, the CoC Application, the CoC Priority Listing, and all the CoC's project applications that were either approved and ranked, or rejected. All three must be submitted for the CoC Consolidated Application to be considered complete.

The Collaborative Applicant is responsible for reviewing the following:

1. The FY 2018 CoC Program Competition Notice of Funding Available (NOFA) for specific application and program requirements.
2. The FY 2018 CoC Application Detailed Instructions which provide additional information and guidance for completing the application.
3. All information provided to ensure it is correct and current.
4. Responses provided by project applicants in their Project Applications.
5. The application to ensure all documentation, including attachment are provided.
6. Questions marked with an asterisk (*), which are mandatory and require a response.

1A. Continuum of Care (CoC) Identification

Instructions:

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1A-1. CoC Name and Number: PA-603 - Beaver County CoC

1A-2. Collaborative Applicant Name: County of Beaver

1A-3. CoC Designation: CA

1A-4. HMIS Lead: County of Beaver

1B. Continuum of Care (CoC) Engagement

Instructions:

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1B-1. CoC Meeting Participants. For the period from May 1, 2017 to April 30, 2018, using the list below, applicant must: (1) select organizations and persons that participate in CoC meetings; and (2) indicate whether the organizations and persons vote, including selecting CoC Board members.

Organization/Person Categories	Participates in CoC Meetings	Votes, including selecting CoC Board Members
Local Government Staff/Officials	Yes	Yes
CDBG/HOME/ESG Entitlement Jurisdiction	Yes	Yes
Law Enforcement	Yes	Yes
Local Jail(s)	Yes	No
Hospital(s)	Yes	No
EMS/Crisis Response Team(s)	Yes	No
Mental Health Service Organizations	Yes	Yes
Substance Abuse Service Organizations	Yes	Yes
Affordable Housing Developer(s)	Yes	Yes
Disability Service Organizations	Yes	Yes
Disability Advocates	Yes	Yes
Public Housing Authorities	Yes	Yes
CoC Funded Youth Homeless Organizations	Not Applicable	No
Non-CoC Funded Youth Homeless Organizations	Yes	Yes
Youth Advocates	Yes	Yes
School Administrators/Homeless Liaisons	Yes	Yes
CoC Funded Victim Service Providers	Not Applicable	No
Non-CoC Funded Victim Service Providers	Yes	Yes
Domestic Violence Advocates	Yes	Yes
Street Outreach Team(s)	Yes	Yes
Lesbian, Gay, Bisexual, Transgender (LGBT) Advocates	Yes	Yes
LGBT Service Organizations	No	No
Agencies that serve survivors of human trafficking	Yes	No
Other homeless subpopulation advocates	Yes	Yes
Homeless or Formerly Homeless Persons	Yes	Yes
Mental Illness Advocates	Yes	Yes
Substance Abuse Advocates	Yes	Yes

Other:(limit 50 characters)		
Homeless Veterans Service Organizations	Yes	Yes
Disaster Response Service Organizations	Yes	Yes
Faith Based Organizations	Yes	Yes

**1B-1a. Applicants must describe the specific strategy the CoC uses to solicit and consider opinions from organizations and/or persons that have an interest in preventing or ending homelessness.
(limit 2,000 characters)**

1. Our CoC recognizes that it takes broad partnerships and input to prevent and end homelessness. Thus, we make every effort to engage the whole community in our discussions and planning. This is done by: holding a monthly Housing & Homeless Coalition meeting where attendees share their opinions and insights; attending community events to present information and to seek input; using our listserv (made up of over 250 individuals) to solicit input; and using various strategies to advertise funding opportunities reaching a broad audience. This input is then compiled by the CoC Coordinator and presented to the Governing Board to guide decision making and planning.
2. Our main communication with the public is our monthly partner meeting where 45 individuals representing a variety of perspectives attend. Detailed minutes are kept from this meeting and are posted on our HMIS and our service collaboration network websites and emailed to the listserv. We also use the listserv to solicit input. These communications are also encouraged to be shared with other vested parties. We use our Community Development Program's and the County's websites to reach a broader audience. To reach other service providers and advocates, we use The Cornerstone's (our homeless services hub) website and Facebook page.
3. Input gathered from these efforts is then utilized in a variety of ways. If an idea is presented at the partner meeting with broad support, collaborations are sought on the spot to develop the opportunity. If the insight needs further exploration, a subcommittee is created to do this work and report back at the partner meeting. For complex issues (i.e involving CoC policy development or requiring long term planning), the CoC Coordinator presents the issue to the Governing Board for further exploration and discussion. In each of these cases, the CoC always attempts to use data from HMIS and other reliable sources to test the insight and to guide any planning efforts.

**1B-2.Open Invitation for New Members. Applicants must describe:
(1) the invitation process;
(2) how the CoC communicates the invitation process to solicit new members;
(3) how often the CoC solicits new members; and
(4) any special outreach the CoC conducted to ensure persons experiencing homelessness or formerly homeless persons are encouraged to join the CoC.
(limit 2,000 characters)**

- 1-3. Our CoC has an open invitation to anyone interested in preventing and ending homelessness to join the CoC. The invitation is a standing one and new

members can join at any time. The invitation is posted on the monthly partner meeting agenda and in the minutes which are publicly posted. All members of the CoC partner meeting are encouraged to extend the invitation to interested people as well. Because the meeting is so well attended this strategy is quite effective. Also any agencies who are invited to present at the partner meeting are also invited to join the membership on an ongoing basis. The CoC Coordinator keeps printed invitations with her at all times and hands them out when in the community and to interested stakeholders. She also adds interested parties to the listserv so even if they cannot attend meetings they will still receive minutes and updates. The Coordinator is dedicated to inviting any agency or entity who shares the CoC's objectives of preventing and ending homelessness.

4. Our CoC values the lived experience and input of homeless and formerly homeless people in both our partner meetings and our Governing Board. The Governing Board bylaws require that we have such representation on that board. Our CoC, ESG, and SSVF funded programs understand the value of this input. As program staff work with their participants and get to know their strengths and interests, they can then invite them to join the CoC. By having the invitation come from someone they know and trust, we have seen homeless/formerly homeless people be more comfortable with formally engaging with the CoC. The program staff are also able to help them resolve any logistical issues that may have precluded them from participating such as transportation. Further, the program staff are available to help them solve any issues that may come up from participating in the CoC – from simply answering technical questions about the CoC to addressing possible conflicts.

**1B-3.Public Notification for Proposals from Organizations Not Previously Funded. Applicants must describe how the CoC notified the public that it will accept and consider proposals from organizations that have not previously received CoC Program funding, even if the CoC is not applying for new projects in FY 2018, and the response must include the date(s) the CoC publicly announced it was open to proposals.
(limit 2,000 characters)**

1. The CoC uses public postings on websites, our broad listserv, and announcements at CoC partner meetings to notify the public that it is accepting proposals. The websites used for the bonus opportunities included our Community Development Program (which sees a lot of activity from developers, community organizers, cities and municipalities); the County website; and our HMIS website. We also announced the funding opportunities at our CoC partner meetings and emailed the Request for Proposals (RFPs) to our CoC partners through our listserv. In both cases, partners were encouraged to share the RFPs widely. The RFPs also clearly encouraged entities who have never received CoC funding to consider applying. The RFPs asked for these details in proposals: project design, target population, projected outcomes, budget, and agency capacity. It also directed applicants to email the proposals to the Coordinator by the respective deadlines.

2. The Rank & Review subcommittee reviews submitted proposals and scores them with an objective tool that is based on the details asked for in the RFP. Any questions or discussion is shared with all members of the subcommittee so that everyone is using the same information when scoring the proposals. The proposals with the highest score are then invited to participate in the 2018 CoC Competition.

3. The CoC announced it was accepting proposals for the Bonus on: 5/1/18 (via listserv); 5/2/18 (posted to Community Development Program and County websites); 5/8/18 (posted to HMIS website); and 5/10/18 (announced at the CoC partner meeting).

The CoC announced it was accepting proposals for the DV Bonus on: 7/2/18 (via listserv); 7/3/18 (posted to County and HMIS websites); and 7/12/18 (announced at the CoC partner meeting).

4. N/A

1C. Continuum of Care (CoC) Coordination

Instructions:

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1C-1. CoCs Coordination, Planning, and Operation of Projects. Applicants must use the chart below to identify the federal, state, local, private, and other organizations that serve individuals, families, unaccompanied youth, persons who are fleeing domestic violence who are experiencing homelessness, or those at risk of homelessness that are included in the CoCs coordination, planning, and operation of projects.

Entities or Organizations the CoC coordinates planning and operation of projects	Coordinates with Planning and Operation of Projects
Housing Opportunities for Persons with AIDS (HOPWA)	Not Applicable
Temporary Assistance for Needy Families (TANF)	Yes
Runaway and Homeless Youth (RHY)	Not Applicable
Head Start Program	Yes
Funding Collaboratives	Yes
Private Foundations	Yes
Housing and services programs funded through U.S. Department of Justice (DOJ) Funded Housing and Service Programs	Not Applicable
Housing and services programs funded through U.S. Health and Human Services (HHS) Funded Housing and Service Programs	Yes
Housing and service programs funded through other Federal resources	Yes
Housing and services programs funded through State Government	Yes
Housing and services programs funded through Local Government	Yes
Housing and service programs funded through private entities, including foundations	Yes
Other:(limit 50 characters)	
Pennsylvania Homeless Assistance Program	Yes
Supportive Services for Veteran Families	Yes

1C-2. CoC Consultation with ESG Program Recipients. Applicants must describe how the CoC:

- (1) consulted with ESG Program recipients in planning and allocating ESG funds; and**
 - (2) participated in the evaluating and reporting performance of ESG Program recipients and subrecipients.**
- (limit 2,000 characters)**

1. The CoC Coordinator meets with the ESG recipient regularly to review local needs, service gaps, and to make allocation decisions. The ESG recipient is also a member of the CoC's Governing Board which meets quarterly. This board reviews a quarterly outcome dashboard report at each meeting. So the

ESG recipient is informed through this meeting about CoC outcomes, service gaps, and unmet needs. The ESG recipient can then use this information to direct their planning and allocation decisions. The subrecipients report monthly to the ESG recipient and any unusual data is shared with the CoC Coordinator to determine if a course of action is required.

2. The System Performance Measures report is shared with each of the programs contributing data to it including ESG recipients and subrecipients. The CoC Coordinator reviews this report with the programs providing assistance with interpretation, analysis, and planning. With our new HMIS software, we are now able to run system performance measures at the program level which will be shared with the ESG recipient and subrecipients for monitoring as well. The CoC Coordinator also regularly works with the ESG recipient/subrecipients on the importance of collecting and reporting the correct data, ensuring data quality, and analyzing their data on a regular basis.

1C-2a. Providing PIT and HIC Data to Consolidated Plan Jurisdictions. Did the CoC provide Point-in-Time (PIT) and Housing Inventory Count (HIC) data to the Consolidated Plan jurisdictions within its geographic area? Yes to both

1C-2b. Providing Other Data to Consolidated Plan Jurisdictions. Did the CoC provide local homelessness information other than PIT and HIC data to the jurisdiction(s) Consolidated Plan(s)? Yes

1C-3. Addressing the Safety Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors. Applicants must describe:

(1) the CoC's protocols, including the existence of the CoC's emergency transfer plan, that prioritizes safety and trauma-informed, victim-centered services to prioritize safety; and

**(2) how the CoC maximizes client choice for housing and services while ensuring safety and confidentiality.
(limit 2,000 characters)**

1. Our Governing Board has incorporated an "Emergency Transfer Plan for Victims of DV" into our CoC Policies & Procedures which apply to both CoC and ESG funded programs. CoC funded housing programs are expected to provide the Notice of Occupancy Rights under the VAWA to participants. The monitoring subcommittee monitors the CoC funded programs participants' charts and Policies & Procedures for documentation of this. The Coordinated Entry (CE) Policies & Procedures stipulate that CE staff will create a safety plan with any household who identifies with DV status and that CE staff will receive annual training on DV protocol and best practices. Further, one of our PSH directors who was a former DV service provider, provided training to the CoC funded housing programs on how to develop a safety plan. Additionally, our Victim Service Provider did two trainings for our CoC funded programs and CE on the best practices of Trauma Informed Care, Victim Centered Services, and

Legal Advocacy. CoC funded housing programs and CE staff work to protect both the confidentiality and safety of each DV household. By creating safety plans with these households they have valuable information about how to enhance their safety. Also, any presenting households with DV status are strongly encourage to engage with our Victim Service Provider however these households are not required to follow through on the referral.

2. Our CoC holds the belief that people know what is best for them. This belief is reflected in our Coordinated Entry (CE) policies which means that households with DV status coming through CE are given choice on which programs they want to engage in and where they would like to live. Because CE does a safety plan with DV households, the worker has valuable information about what creates a sense of safety for the household and can work with them in locating those characteristics. DV status is always kept confidential throughout the CE process as well as in HMIS.

1C-3a. Applicants must describe how the CoC coordinates with victim services providers to provide annual training to CoC area projects and Coordinated Entry staff that addresses best practices in serving survivors of domestic violence, dating violence, sexual assault, and stalking. (limit 2,000 characters)

Our Victim Services Provider has a long history of playing an active role in our CoC. They actively participate in our CoC partner meetings; and are members of our Governing Board providing DV expertise to the CoC planning process. For several years, their Executive Director participated in the Rank & Review process scoring and ranking the CoC applications and again lending their DV expertise to that process (the VSP did not participate in Rank & Review this year due a conflict since they are a critical partner in the DV Bonus project). The VSP also participated in the development and implementation of our current Coordinated Entry (CE) process. The VSP maintains a separate database and readily shares unidentifiable data with the CoC for planning purposes.

1. The VSP is a regular attendee at the monthly CoC partner meeting. In the last year, they provided two trainings at that meeting for project staff. The first one included an overview of: the prevalence of DV, the supports/services the VSP offers, and information specifically for agencies about providing Trauma Informed Care and rendering Victim Centered Services. The other training they provided was about the Legal Advocacy services offered by the VSP. They also provided education on resources available at the local hospital with whom they partner.

2. The VSP played an active role in developing our CE process. They provided the tool for use by the CE staff when developing a safety plan with households who have identified with DV status. They also provided training on how to use the tool, reviewed additional supports that could be offered, and provided an overview on Trauma Informed Care and Victim Centered Services. The VSP also discussed the importance of confidentiality and ensured that this was worked into the CE protocol. The CE Policies & Procedures dictate that the CE staff will be trained annually on DV protocol.

1C-3b. Applicants must describe the data the CoC uses to assess the scope of community needs related to domestic violence, dating violence, sexual assault, and stalking, including data from a comparable database. (limit 2,000 characters)

Our Victim Services Provider (VSP) shares de-identified aggregate data from their comparable database with the CoC to assess the specialized needs of people with DV status. First, they provide information for the Point In Time survey including information on special conditions so that the CoC can better understand the unique needs of people experiencing DV and homelessness. The VSP also provides data for the Housing Inventory Chart. Also, when the DV Bonus opportunity was announced the VSP provided data to help inform the development of a new project development to best meet the needs of DV households. Our CoC also collects DV status when households are enrolled into CoC and ESG programs. This data is stored separately in HMIS and only the HMIS Lead can see it. This data can be pulled in aggregate form helping us to understand the scope of households with DV status as well as the special conditions that they face. The CoC Coordinator and the VSP Director are planning to add DV data to the quarterly outcomes report presented to the CoC Governing Board so that this data will be even more closely monitored.

**1C-4. DV Bonus Projects. Is your CoC Yes
applying for DV Bonus Projects?**

1C-4a. From the list, applicants must indicate the type(s) of DV Bonus project(s) that project applicants are applying for which the CoC is including in its Priority Listing.

SSO Coordinated Entry	<input type="checkbox"/>
RRH	<input checked="" type="checkbox"/>
Joint TH/RRH	<input type="checkbox"/>

1C-4b. Applicants must describe:

- (1) how many domestic violence survivors the CoC is currently serving in the CoC's geographic area;
- (2) the data source the CoC used for the calculations; and
- (3) how the CoC collected the data.
(limit 2,000 characters)

1. Our CoC is currently serving 68 households with DV status.
2. This data was collected from our HMIS database and from our Victim Service Providers (VSP) comparable data base. The VSP data reported was in aggregate form only without personally identifying information included.
3. Our CoC funded programs collect DV status at intake which is then entered into HMIS. DV data is stored separately in HMIS only viewable by the HMIS Lead. For the purpose of analyzing the scope of DV in our CoC, the CoC Coordinator reached out to the HMIS Lead. She requested the number of people with DV status who are currently being served in our CoC including numbers from our Victim Service Provider. The HMIS Lead then pulled the data from HMIS and reached out to the Victim Service Provider requesting the de-identified data from them. He then compiled the aggregate data for the CoC Coordinator to analyze the scope of the DV issue in the CoC.

1C-4c. Applicants must describe:

- (1) how many domestic violence survivors need housing or services in the CoC's geographic area;**
 - (2) data source the CoC used for the calculations; and**
 - (3) how the CoC collected the data.**
- (limit 2,000 characters)**

1. Currently there are 25 people with DV status who have been screened through Coordinated Entry and remain in need of housing.
2. This data came from our Coordinated Entry waiting lists.
3. DV status is hidden from the Coordinated Entry waiting lists. Only the HMIS Lead has access to this information. In order to determine how many people with DV status remain in need of housing, the CoC Coordinator reached out to the HMIS Lead. He pulled the data from the Coordinated Entry waiting lists and database, and provided it to the CoC Coordinator in de-identified, aggregate form. The CoC Coordinator then analyzed it to determine unmet need DV survivors.

1C-4d. Based on questions 1C-4b. and 1C-4c., applicant must:

- (1) describe the unmet need for housing and services for DV survivors, or if the CoC is applying for an SSO-CE project, describe how the current Coordinated Entry is inadequate to address the needs of DV survivors;**
 - (2) quantify the unmet need for housing and services for DV survivors;**
 - (3) describe the data source the CoC used to quantify the unmet need for housing and services for DV survivors; and**
 - (4) describe how the CoC determined the unmet need for housing and services for DV survivors.**
- (limit 3,000 characters)**

1. Currently in our CoC there are 25 people with DV status with unmet housing needs. (We acknowledge that this number is likely much higher due to cases of DV and housing instability who have not presented for services). Also, our Victim Service Provider (VSP) reports that only 16% of their admissions exited to PH. Our CoC recognizes several factors that impact this unmet need. First, our current RRH program offers short term assistance only. This means that DV survivors who may not have established a stable income yet, would be set up to fail in a program that only offers short term assistance. Second, our PSH programs tend to consistently run at full capacity. Although our Coordinated Entry process prioritizes households with DV status, they may still experience long wait times for PSH. Further, this episode of homelessness may be the first time a household has been homeless thus not meeting criteria for chronic homelessness making PSH an even tougher option to access. Third, we understand that households with DV status have unique challenges to securing housing. They may have difficulty getting utilities turned on in their name. They may have criminal histories as a result of the DV which may not pass background checks required by some landlords. Although the household likely suffered trauma they may not meet the criteria of serious, persistent mental illness which is required by most of the case management services in our area. Further, most case management is not generally set up to expertly navigate the complex housing system.

2. We currently know of 25 people with DV status who have unmet housing needs. This was determined by our Coordinated Entry waiting lists. The average wait time on these lists is 73 days. This grossly exceeds our expectation to rehouse households within 30 days. Also, our VSP reported only

16% of their admissions exited to PH.

3. HMIS and Coordinated Entry data were used to quantify the unmet housing needs. The unmet service needs were identified through our monthly Coordinated Entry meetings where we review the cases who have the longest wait times and identify the obstacles preventing them from accessing housing. Although this group is not able to see DV status at those meetings, we were able to extrapolate the information and anecdotally apply it to the unique challenges faced by DV households.

4. We determined the unmet need by using homeless status data, and length of time homeless data from HMIS, Coordinated Entry, and our VSP. We also used knowledge of current services and the gaps that remain. We then related how these gaps uniquely impact households with DV status. This multi-layered analysis enabled us to see where the system is not meeting the housing and service needs of households with DV status in our CoC.

1C-4e. Applicants must describe how the DV Bonus project(s) being applied for will address the unmet needs of domestic violence survivors. (limit 2,000 characters)

To meet this unmet, we propose a RRH program through the DV bonus with medium term rental assistance. It will be run by the Housing Authority of Beaver County with their expert knowledge in housing and closely partnered with our Victim Service Provider (VSP). Thus, households with DV status will benefit from the expertise of both the VSP and the Housing Authority. The VSP will continue to provide emergency shelter and therapy to address trauma issues. Under this project they will now offer case management specific to navigating the housing system with their unique needs. The VSP will initially provide daily contact thereby giving the household intensive support until stabilization is reached including securing steady income. With the use of the VSP's mobile case manager, they will be able to directly link households to the supports and services they need. They will also provide direct support in the home as well. The Housing Authority will provide expert knowledge in housing including landlord partnerships, linking with utility resources, advocating for McKinney Vento protections and ensuring the children are enrolled in school, and linking with other partner agencies as needed to achieve housing stability. Both the VSP and the Housing Authority have been strong CoC partners for many years. In fact, they both lend their leadership and expertise on our Governing Board. This affords them direct access to our CoC Partners which means they are uniquely positioned to give access to a rich spectrum of services to best respond to the households' complex needs. The project proposes to help 32 people with DV status to achieve housing stability. This scope would resolve our current unmet of 25 people with DV status in need of housing.

1C-4f. Applicants must address the capacity of each project applicant applying for DV bonus projects to implement a DV Bonus project by describing:

- (1) rate of housing placement of DV survivors;**
- (2) rate of housing retention of DV survivors;**
- (3) improvements in safety of DV survivors; and**
- (4) how the project applicant addresses multiple barriers faced by DV survivors.**

(limit 4,000 characters)

1. The project proposes that 85% of admissions will transition to PH within 2 years. Through the use of the Housing Authority's (HA) extensive landlord partners list, this project is uniquely positioned to successfully link households to stable housing. The HA will work with landlord partners to educate them on the challenges faced by households with DV status as well as the value of rents that include utilities. By completing a comprehensive assessment of needs and safety planning at intake, the Victim Service Provider will work closely with the household to identify housing that affords them the best opportunity for stabilization. For example, locating closer to natural supports. This specific knowledge of the household combined with the HA's landlord lists, should result in quick housing placements thereby reducing the length of time homeless. Further, this project has built in funding to help the household get quickly established in the home including funding for furniture, groceries, transportation, and household goods (toilet paper, blinds, towels, cleaning supplies, trash cans etc).
2. This project proposes that they will see a 65% reduction in the rate at which DV households return to the abusive situation. This data will be tracked by the VSP. To achieve this goal, the project recognizes that housing retention is critical. Thus they will work with the household to secure stable income sources either through mainstream resources, employment/job training, or education. Once stable income is secured they will work with households to create sustainable budgets and will refer for budget counseling as needed. They will also assist with setting up a bank account for those households who do not have one. The mobile case manager will also be able to provide in-home support so that day to day household maintenance can also be addressed as need. These issues might include: addressing safety issues in the home, paying rent/bills on time, ensuring there is enough food in the home, and creating a sense of comfort in the home.
3. The VSP will start safety planning with the household upon receipt of the referral. The VSP has 41 years of experience in safety planning and thus will provide expertise in creating these plans. These plans will be adjusted as the household's situation changes (and according to best practice) ensuring that it is always relevant. Education on services such as Protection from Abuse orders, and the variety of advocacy services offered by the VSP will also be provided. Data will always be protected so the safety of the household's location is not compromised. And because having a stable source of income addresses a number of safety issues, the project proposes to assist 80% of households with increasing/maintaining their income.
4. This project was designed with extensive knowledge of the multiple barriers that households with DV status face. Because of this, the project includes a mobile case manager to work directly with households in navigating the complex housing system and maintaining safety. It also includes funding to provide housing and advocacy services, groceries, household goods, furniture, and transportation so that a household can quickly stabilize. The case manager will address immediate needs through linking to safe housing and creating a relevant safety plan. And she will work to link households with sources for stable income. The project provides advocacy and treatment supports to address psychological trauma. Because of the intensity of many households' needs, the project is also prepared to provide daily contact initially. And because each household will present with unique, and often times complex needs, the project is prepared to engage many of our CoC partners including: wellness, education, job training, food resources, utility assistance, healthcare,

and mainstream resources.

1C-5. PHAs within CoC. Applicants must use the chart to provide information about each Public Housing Agency (PHA) in the CoC's geographic areas:

- (1) Identify the percentage of new admissions to the Public Housing or Housing Choice Voucher (HCV) Programs in the PHA who were experiencing homelessness at the time of admission;**
- (2) Indicate whether the PHA has a homeless admission preference in its Public Housing and/or HCV Program; and**
- (3) Indicate whether the CoC has a move on strategy. The information should be for Federal Fiscal Year 2017.**

Public Housing Agency Name	% New Admissions into Public Housing and Housing Choice Voucher Program during FY 2017 who were experiencing homelessness at entry	PHA has General or Limited Homeless Preference	PHA has a Preference for current PSH program participants no longer needing intensive supportive services, e.g. move on?
Housing Authority of the County of Beaver	13.00%	Yes-Both	No

If you select "Yes--Public Housing," "Yes--HCV," or "Yes--Both" for "PHA has general or limited homeless preference," you must attach documentation of the preference from the PHA in order to receive credit.

1C-5a. For each PHA where there is not a homeless admission preference in their written policy, applicants must identify the steps the CoC has taken to encourage the PHA to adopt such a policy. (limit 2,000 characters)

OUR PHA DOES HAVE PREFERENCE POLICY.

Our PHA has a long history of being actively involved with the CoC. They regularly attend our CoC partner meetings and serve on the Governing Board. Although only 13% of new admissions identified as homeless, we continue to suspect that there are more homeless people being admitted who are not revealing their homeless status. We continue to work with our CoC partners who assist households with their PHA applications to encourage them to reveal their homeless status so they can receive preference and shorten their length of time homeless.

As for Move On Strategies, many of our affordable housing providers reach out to our PSH programs when they have an opening thereby giving people exiting PSH the first opportunity to access their available units. In fact, 36% of PSH exits moved on to their own subsidized units. Although the PHA does not have a formal preference for people exiting PSH they do consider their positive histories with PSH programs when they may have otherwise denied them admission. The CoC Coordinator is working with each of these affordable housing providers to formalize these strategies already in place.

1C-5b. Move On Strategy with Affordable Housing Providers. Does the CoC have a Move On strategy with affordable housing providers in its jurisdiction (e.g., multifamily assisted housing owners, PHAs, Low Income Tax Credit (LIHTC) developments, or local low-income housing programs)? No

1C-6. Addressing the Needs of Lesbian, Gay, Bisexual, Transgender (LGBT). Applicants must describe the actions the CoC has taken to address the needs of Lesbian, Gay, Bisexual, and Transgender individuals and their families experiencing homelessness. (limit 2,000 characters)

Our CoC Governing Board has included the Equal Access Rule in its CoC Policies & Procedures which direct both the CoC and ESG funded programs. The monitoring subcommittee reviews the CoC funded housing programs' Policies & Procedures to ensure these standards are part of their admission processes. Further the Governing Board has adopted the Non-Discrimination and Equal Opportunity policy mandating that CoC funded housing programs and ESG funded programs provide housing regardless of perceived sexual orientation, gender identity, or marital status, and to not separate families. We have also created an atypical shelter in the form of apartments for people who do not feel comfortable in the traditional shelters. Further, our System of Care (which utilizes a Comprehensive Continuous Integrated System of Care model to meet complex needs through collaboration with a variety of behavioral health partners) provides a series of LGBTQ trainings throughout the year. These trainings provide an overview of the unique needs of LGBTQ individuals and youth as well as best practices for working with them. Our CoC also partners with our local Fair Housing Law Clinic to both monitor for discrimination and to provide legal action when discrimination is founded. The Fair Housing Law Clinic is a regular attendee at our CoC partner meetings and continually provides education on what discrimination looks like for specific populations including LGTBQ. The CoC Coordinator extends invitations to local LGBTQ agencies to join our CoC and she subscribes to their listservs. She distributes these agencies' updates to our CoC partners which raises their awareness of the unique needs that their LGBTQ clients may face and provides them additional resources. The CoC also made the Housing Alliance webinar's on Equal Access available to all HUD funded programs with instructions to watch it and ensure these policies are being implemented in their programs.

1C-6a. Anti-Discrimination Policy and Training. Applicants must indicate if the CoC implemented a CoC-wide anti-discrimination policy and conducted CoC-wide anti-discrimination training on the Equal Access Final Rule and the Gender Identity Final Rule.

1. Did the CoC implement a CoC-wide anti-discrimination policy that applies to all projects regardless of funding source?	Yes
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2. Did the CoC conduct annual CoC-wide training with providers on how to effectively implement the Equal Access to Housing in HUD Programs Regardless of Sexual Orientation or Gender Identity (Equal Access Final Rule)?	Yes
3. Did the CoC conduct annual CoC-wide training with providers on how to effectively implement Equal Access to Housing in HUD Programs in Accordance with an Individual's Gender Identity (Gender Identity Final Rule)?	Yes

1C-7. Criminalization of Homelessness. Applicants must select the specific strategies the CoC implemented to prevent the criminalization of homelessness in the CoC's geographic area. Select all that apply.

Engaged/educated local policymakers:	<input checked="" type="checkbox"/>
Engaged/educated law enforcement:	<input checked="" type="checkbox"/>
Engaged/educated local business leaders:	<input checked="" type="checkbox"/>
Implemented communitywide plans:	<input checked="" type="checkbox"/>
No strategies have been implemented:	<input type="checkbox"/>
Other:(limit 50 characters)	
	<input type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>

1C-8. Centralized or Coordinated Assessment System. Applicants must:
(1) demonstrate the coordinated entry system covers the entire CoC geographic area;
(2) demonstrate the coordinated entry system reaches people who are least likely to apply homelessness assistance in the absence of special outreach;
(3) demonstrate the assessment process prioritizes people most in need of assistance and ensures they receive assistance in a timely manner; and
(4) attach CoC's standard assessment tool.
(limit 2,000 characters)

1. Our Coordinated Entry (CE) system covers the entire CoC geographic area. This is noted in the introduction of our CE Policies & Procedures. Our CE worker takes calls from anywhere and also has the ability to meet with households where they are in the geographic area. This also allows the CE worker to meet with households where they may be most comfortable.

2. Because the CE worker is mobile she can meet with people who may be reluctant to come into the center. She also has the ability to visit places where homeless people may gather (soup kitchens, shelters etc) but again who may not reach out for CE screening. Recently the men's emergency shelter coordinator has started holding office hours at the center where CE takes place. She is able to directly walk the men over to the CE office for screening which

has significantly improved the percentage of shelter guests going through the CE process. Our outreach teams also assist with linking unsheltered folks directly to CE either through a phone call or setting up an appointment in the community.

3. Our CE subcommittee developed the CE tool to prioritize those populations that the CoC identified as prioritized populations. Those populations include: families, people with child welfare involvement, chronically homeless, veterans, youth aging out of foster care, and unaccompanied youth. The tool is also designed to prioritize those with multiple chronic health issues (both physical and behavioral), poor rental histories, no income, and poor support systems. If the CE worker places someone on a waiting list, they also refer them to housing case management so they can start addressing housing barriers while they wait. Also, the CE subcommittee reviews the waiting lists monthly to ensure quick movement from the list and will make recommendations accordingly.

4. Attached.

1D. Continuum of Care (CoC) Discharge Planning

Instructions:

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1D-1. Discharge Planning–State and Local. Applicants must indicate whether the CoC has a discharge policy to ensure persons discharged from the systems of care listed are not discharged directly to the streets, emergency shelters, or other homeless assistance programs. Check all that apply (note that when "None:" is selected no other system of care should be selected).

Foster Care:	<input checked="" type="checkbox"/>
Health Care:	<input checked="" type="checkbox"/>
Mental Health Care:	<input checked="" type="checkbox"/>
Correctional Facilities:	<input checked="" type="checkbox"/>
None:	<input type="checkbox"/>

1D-2. Discharge Planning Coordination. Applicants must indicate whether the CoC actively coordinates with the systems of care listed to ensure persons who have resided in them longer than 90 days are not discharged directly to the streets, emergency shelters, or other homeless assistance programs. Check all that apply (note that when "None:" is selected no other system of care should be selected).

Foster Care:	<input checked="" type="checkbox"/>
Health Care:	<input checked="" type="checkbox"/>
Mental Health Care:	<input checked="" type="checkbox"/>
Correctional Facilities:	<input checked="" type="checkbox"/>
None:	<input type="checkbox"/>

1E. Continuum of Care (CoC) Project Review, Ranking, and Selection

Instructions

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1E-1. Project Ranking and Selection. Applicants must indicate whether the CoC used the following to rank and select project applications for the FY 2018 CoC Program Competition:

- (1) objective criteria;**
- (2) at least one factor related to achieving positive housing outcomes;**
- (3) a specific method for evaluating projects submitted by victim services providers; and**
- (4) attach evidence that supports the process selected.**

Used Objective Criteria for Review, Rating, Ranking and Section	Yes
Included at least one factor related to achieving positive housing outcomes	Yes
Included a specific method for evaluating projects submitted by victim service providers	Yes

1E-2. Severity of Needs and Vulnerabilities. Applicants must describe:
(1) the specific severity of needs and vulnerabilities the CoC considered when reviewing, ranking, and rating projects; and
(2) how the CoC takes severity of needs and vulnerabilities into account during the review, rating, and ranking process.
(limit 2,000 characters)

1. Rank & Review members gave project applications points for serving people with these characteristics of need: low or no income; substance use, history of victimization, criminal histories, chronic homeless status, poor rental history, and having no interest in supportive services. Projects were given one point for each characteristic listed in the application. Points were also given for mentioning serving these populations: families, victims of domestic violence, youth, and veterans. Again one point was given for each population the application listed. The Rank & Review tool was designed this way to give projects the opportunity to score more points for serving people with complex needs and vulnerabilities.

2. The scoring tool gives an objective score based on severity of needs and vulnerabilities. The Rank & Review members then combine and average these scores so the projects can be objectively compared. The members then consider project specific details in relation to the projects being able to capably serve those with the highest needs. Some of these details include: the amount and type of supportive services offered, partnerships available to enhance social service offerings, how many people a project can serve, and ability to

serve specific populations. The objective of taking these details into consideration is to ensure that the programs ranked the highest had the strongest ability to meet complex needs of participants. As we have fully implemented our Coordinated Entry process, we have noted an increase in the complexity of needs of the households being referred into the CoC funded programs. Thus we wanted to ensure that those programs who have the most capacity for meeting these needs were prioritized for funding.

- 1E-3. Public Postings. Applicants must indicate how the CoC made public:**
- (1) objective ranking and selection process the CoC used for all projects (new and renewal);**
 - (2) CoC Consolidated Application—including the CoC Application, Priority Listings, and all projects accepted and ranked or rejected, which HUD required CoCs to post to their websites, or partners websites, at least 2 days before the CoC Program Competition application submission deadline; and**
 - (3) attach documentation demonstrating the objective ranking, rating, and selections process and the final version of the completed CoC Consolidated Application, including the CoC Application with attachments, Priority Listing with reallocation forms and all project applications that were accepted and ranked, or rejected (new and renewal) was made publicly available, that legibly displays the date the CoC publicly posted the documents.**

Public Posting of Objective Ranking and Selection Process		Public Posting of CoC Consolidated Application including: CoC Application, Priority Listings, Project Listings	
CoC or other Website	<input type="checkbox"/>	CoC or other Website	<input type="checkbox"/>
Email	<input type="checkbox"/>	Email	<input type="checkbox"/>
Mail	<input type="checkbox"/>	Mail	<input type="checkbox"/>
Advertising in Local Newspaper(s)	<input type="checkbox"/>	Advertising in Local Newspaper(s)	<input type="checkbox"/>
Advertising on Radio or Television	<input type="checkbox"/>	Advertising on Radio or Television	<input type="checkbox"/>
Social Media (Twitter, Facebook, etc.)	<input type="checkbox"/>	Social Media (Twitter, Facebook, etc.)	<input type="checkbox"/>

1E-4. Reallocation. Applicants must indicate whether the CoC has cumulatively reallocated at least 20 percent of the CoC's ARD between the FY 2014 and FY 2018 CoC Program Competitions.

Reallocation: No

**1E-4a. If the answer is "No" to question 1E-4, applicants must describe how the CoC actively reviews performance of existing CoC Program-funded projects to determine the viability of reallocating to create new high performing projects.
(limit 2,000 characters)**

1. Our CoC Governing Board makes an annual decision about whether to reallocate CoC funding from under-performing projects to create new higher

performing or more relevant projects. This decision is made on the informed recommendation of the CoC Coordinator. The CoC Coordinator analyzes Technical Assistance Review scores (our annual project monitoring), Annual Progress Report outcomes, cost effectiveness, while considering changing local needs, and other special circumstances as warranted. Should the Governing Board decide to reallocate, they then detail the specifications for the reallocation within the guidelines of that year's NOFA.

2. Our CoC has not reallocated 20% of our funds since 2014 for several reasons. First, we lost \$87,000 during this time period. These cuts were made to our Tier 2 projects which naturally eliminated our lower performing projects. In fact we lost two PSH projects in the FY 2015 competition. With the benefit of hindsight, we acknowledge that it would have benefited the CoC to reallocate those projects (due to the performance that placed them in Tier 2), to projects that had stronger capacity. That being said we are a small CoC and the number of agencies who have both experience with homelessness and fiscal capacity to manage a federal grant are limited. We make every effort to engage agencies who show promise so that we have bench strength when it comes to funding new partners. But the main reason we have not reallocated more funds during this time period is because our remaining CoC funded programs are strong performers. They show: positive housing outcomes; they engage a broad spectrum of partners to enhance their service offerings; they work collaboratively to ensure each homeless household is housed quickly; and they operate at or below the national cost per household benchmarks. These programs make a direct impact on ending homelessness in our CoC and therefore reallocating their funds is not warranted.

1E-5. Local CoC Competition. Applicants must indicate whether the CoC:

- (1) established a deadline for project applications that was no later than 30 days before the FY 2018 CoC Program Competition Application deadline—attachment required;**
- (2) rejected or reduced project application(s)—attachment required; and**
- (3) notify applicants that their project application(s) were being rejected or reduced, in writing, outside of e-snaps, at least 15 days before FY 2018 CoC Program Competition Application deadline—attachment required. :**

(1) Did the CoC establish a deadline for project applications that was no later than 30 days before the FY 2018 CoC Program Competition Application deadline? Attachment required.	Yes
(2) If the CoC rejected or reduced project application(s), did the CoC notify applicants that their project application(s) were being rejected or reduced, in writing, outside of e-snaps, at least 15 days before FY 2018 CoC Program Competition Application deadline? Attachment required.	Did not reject or reduce any project
(3) Did the CoC notify applicants that their applications were accepted and ranked on the Priority Listing in writing outside of e-snaps, at least 15 before days of the FY 2018 CoC Program Competition Application deadline?	Yes

2A. Homeless Management Information System (HMIS) Implementation

Intructions:

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2A-1. Roles and Responsibilities of the CoC and HMIS Lead. Does your CoC have in place a Governance Charter or other written documentation (e.g., MOU/MOA) that outlines the roles and responsibilities of the CoC and HMIS Lead? Attachment Required. Yes

2A-1a. Applicants must:
(1) provide the page number(s) where the roles and responsibilities of the CoC and HMIS Lead can be found in the attached document(s) referenced in 2A-1, and
(2) indicate the document type attached for question 2A-1 that includes roles and responsibilities of the CoC and HMIS Lead (e.g., Governance Charter, MOU/MOA).

CoC Role on Pg 1-3 in Governance Charter ;
HMIS Lead on Pgs. 4-5 in HMIS Manual
(attached to 2A.2)

2A-2. HMIS Policy and Procedures Manual. Does your CoC have a HMIS Policy and Procedures Manual? Attachment Required. Yes

2A-3. HMIS Vender. What is the name of the HMIS software vendor? PA-HMIS ClientTrack

2A-4. HMIS Implementation Coverage Area. Using the drop-down boxes, applicants must select the HMIS implementation Coverage area. Single CoC

2A-5. Bed Coverage Rate. Using 2018 HIC and HMIS data, applicants must report by project type:
(1) total number of beds in 2018 HIC;
(2) total beds dedicated for DV in the 2018 HIC; and

(3) total number of beds in HMIS.

Project Type	Total Beds in 2018 HIC	Total Beds in HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter (ESG) beds	101	22	79	100.00%
Safe Haven (SH) beds	0	0	0	
Transitional Housing (TH) beds	38	10	28	100.00%
Rapid Re-Housing (RRH) beds	18	0	18	100.00%
Permanent Supportive Housing (PSH) beds	153	0	153	100.00%
Other Permanent Housing (OPH) beds	0	0	0	

**2A-5a. To receive partial credit, if the bed coverage rate is 84.99 percent or lower for any of the project types in question 2A-5., applicants must provide clear steps on how the CoC intends to increase this percentage for each project type over the next 12 months.
(limit 2,000 characters)**

N/A

2A-6. AHAR Shells Submission: How many 2017 Annual Housing Assessment Report (AHAR) tables shells did HUD accept? 12

2A-7. CoC Data Submission in HDX. Applicants must enter the date the CoC submitted the 2018 Housing Inventory Count (HIC) data into the Homelessness Data Exchange (HDX). (mm/dd/yyyy) 04/30/2018

2B. Continuum of Care (CoC) Point-in-Time Count

Instructions:

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2B-1. PIT Count Date. Applicants must enter the date the CoC conducted its 2018 PIT count (mm/dd/yyyy). 01/24/2018

2B-2. HDX Submission Date. Applicants must enter the date the CoC submitted its PIT count data in HDX (mm/dd/yyyy). 04/30/2018

2C. Continuum of Care (CoC) Point-in-Time (PIT) Count: Methodologies

Instructions:

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

**2C-1. Change in Sheltered PIT Count Implementation. Applicants must describe any change in the CoC's sheltered PIT count implementation, including methodology and data quality changes from 2017 to 2018. Specifically, how those changes impacted the CoC's sheltered PIT count results.
(limit 2,000 characters)**

We did not make any changes to our methodology for the sheltered PIT count in 2018. We used HMIS and provider surveys (from our Victim Service Provider) and we were able to report on each of the programs listed on the HIC. Our data quality improved, but this was not as a result of changing our methodology. We had new HMIS software in 2018 which streamlined the preparation of the PIT shelter count thereby reducing the chance of errors. Further, in the last year the CoC Coordinator and HMIS Lead continued to focus on educating HMIS users on the importance of data quality and provided technical assistance to enhance their data quality. Our HMIS Lead pulls the data on the night of the PIT survey and sends it to the programs to verify its accuracy. This has been our practice for many years and for the second year in a row, we were able to use the data without any edits.

We did experience an increase in our sheltered count in 2018. We had an increase of 13 people in ES and 10 people in TH this year. Both of these program types have experienced increases in capacity in the last year.

- Our men's ES program had been operating at a consistently high census for the year ahead of the PIT and added two beds
- Our family ES program also added an additional unit with 3 beds
- One of our TH programs is consistently serving larger families so they added two beds

The remaining ES and TH programs had slightly higher census counts on the night of the PIT which could be attributed to Coordinated Entry.

*Please note that ES is not accessed through Coordinated Entry. But it is not unusual for someone who has been screened by Coordinated Entry to be referred to ES.

2C-2. Did your CoC change its provider coverage in the 2018 sheltered count? Yes

2C-2a. If "Yes" was selected in 2C-2, applicants must enter the number of beds that were added or removed in the 2018 sheltered PIT count.

Beds Added:	7
Beds Removed:	2
Total:	5

2C-3. Presidentially Declared Disaster No
Changes to Sheltered PIT Count. Did your CoC add or remove emergency shelter, transitional housing, or Safe Haven inventory because of funding specific to a Presidentially declared disaster, resulting in a change to the CoC's 2018 sheltered PIT count?

2C-3a. If "Yes" was selected for question 2C-3, applicants must enter the number of beds that were added or removed in 2018 because of a Presidentially declared disaster.

Beds Added:	0
Beds Removed:	0
Total:	0

2C-4. Changes in Unsheltered PIT Count Yes
Implementation. Did your CoC change its unsheltered PIT count implementation, including methodology and data quality changes from 2017 to 2018? If your CoC did not conduct and unsheltered PIT count in 2018, select Not Applicable.

2C-4a. If "Yes" was selected for question 2C-4, applicants must:
(1) describe any change in the CoC's unsheltered PIT count implementation, including methodology and data quality changes from 2017 to 2018; and
(2) specify how those changes impacted the CoC's unsheltered PIT count results.
(limit 2,000 characters)

1. We enhanced our outreach efforts in 2018 by adding the Salvation Army's disaster response truck to canvass the rural areas in our CoC geographic area. As we did in the past, we also had 5 drop in centers throughout the CoC to which homeless people could self-report. However, we suspected that people residing in more rural areas may not have the means to access the drop in centers. So we utilized the truck to sit in locations in the rural regions and to also canvass those areas, thereby, conducting more thorough outreach. We also planned to have our Fire Department canvass the river banks with their rescue boats to locate homeless camps but due to a large fire at the time, they were unable to participate. (They conducted the effort after the PIT day with 2 other fire departments and scanned the majority of the river banks in our CoC – locating several homeless camps where comfort items and referral information were left. The outreach teams then followed up with further engagement).

2. We expected to find more people through this additional outreach, but we had a reduction in our 2018 unsheltered count. We found 4 less people than we did in 2017. This leads us to believe that our on-going outreach efforts throughout the year have resulted in a reduction in unsheltered homelessness. Our Outreach sub-committee conducts street outreach throughout the year and as a result we have a team of experienced and knowledgeable volunteers. Further, we have engaged law enforcement and fire departments in our outreach efforts gaining information about locations where they encounter homeless people. As a result, we have raised awareness about homelessness throughout the county. This heightened awareness has resulted in more "eyes on the street" for unsheltered people throughout the year and resulted in referrals to coordinated entry, and our homeless services hub. We believe this is the reason for the decreased unsheltered count in the 2018 PIT.

2C-5. Identifying Youth Experiencing Homelessness in 2018 PIT Count. Did your CoC implement specific measures to identify youth experiencing homelessness in its 2018 PIT count? Yes

2C-5a. If "Yes" was selected for question 2C-5., applicants must describe:
(1) how stakeholders serving youth experiencing homelessness were engaged during the planning process;
(2) how the CoC worked with stakeholders to select locations where youth experiencing homelessness are most likely to be identified; and
(3) how the CoC involved youth experiencing homelessness in counting during the 2018 PIT count.
(limit 2,000 characters)

1 and 2. The Director of our child welfare agency is an active member on our Governing Board. She provided expertise about places where homeless youth and families may be encountered. She also provided support to purchase supplies for our outreach efforts including suggestions for items that youth would need. And she ensured that her team was aware of the PIT survey and participated fully. Our Education Liaison assisted with alerting the schools about the PIT survey and collecting information from them. In fact we received more information from the schools in 2018 than we did in the last 2 years. The Education Liaison works with the schools to identify which staff positions are best suited to identify homeless youth and she educates them on engagement strategies resulting in better identification/engagement. The Outreach subcommittee also compiled information from their outreach efforts throughout the year and provided the PIT outreach teams with places that homeless youth are likely to be identified including: libraries, the mall, coffee shops, vape shops, and public parks.

3. We did not have any youth experiencing homelessness directly involved in the 2018 PIT survey. We did ask our homeless programs to recommend any youth in their programs who they thought might be interested in participating in the 2018 PIT however this did not result in any homeless youth participation. We did however have youth who were not homeless participate in some of our planning efforts. They assisted with assembling the care packages for the outreach teams to hand out and they shared their perspectives on which items would be meaningful to a homeless youth.

2C-6. 2018 PIT Implementation. Applicants must describe actions the CoC implemented in its 2018 PIT count to better count:

- (1) individuals and families experiencing chronic homelessness;**
 - (2) families with children experiencing homelessness; and**
 - (3) Veterans experiencing homelessness.**
- (limit 2,000 characters)**

The Outreach Subcommittee held 3 planning meetings for the 2018 PIT survey. Strategies were identified during those meetings for reaching special populations.

1. Chronic homelessness is a prioritized population for our CoC so we are always working to engage households with CH status. Specific strategies include: engaging shelter staff for information about where people may be staying outside; engaging homeless and formerly homeless people in our outreach efforts; preparing relevant care packages to help meet CH people's direct care needs and to build trust; and visiting locations where CH people may be including soup kitchens, libraries, camps along the rivers, and laundromats.

2. We used our youth and family services agencies to help identify homeless families and youth. Our child welfare agency provided insight on locations, provided funds for relevant care packages and hotel vouchers, and committed their staff to fully participating in the survey. Our Education Liaison assisted with engaging the schools in identifying homeless youth and families as well. Other family and youth serving agencies were notified of the survey at our CoC partner meeting and through the listserv and their input was sought through both of these means.

3. Our Supportive Services for Veteran Families staff member is an active participant in the Outreach Subcommittee and therefore provided knowledge about locations where homeless veterans may stay as well as expertise on best practices for engaging them. Her connections with community resources helped us spread the word about the survey and resulted in finding a veteran the day of the survey. Also, a staff member from the VA participated in the survey this year and also shared his expertise on locations as well as engagement strategies.

3A. Continuum of Care (CoC) System Performance

Instructions

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

3A-1. First Time Homeless as Reported in HDX. In the box below, applicants must report the number of first-time homeless as reported in HDX.

Number of First Time Homeless as Reported in HDX.

532

3A-1a. Applicants must:

(1) describe how the CoC determined which risk factors the CoC uses to identify persons becoming homeless for the first time;
(2) describe the CoC's strategy to address individuals and families at risk of becoming homeless; and
(3) provide the name of the organization or position title that is responsible for overseeing the CoC's strategy to reduce the number of individuals and families experiencing homelessness for the first time.
(limit 2,000 characters)

1. The CoC has clear markers for identifying households who are at risk of becoming homeless. These include the use of our homeless prevention services and our utility assistance programs. Both of these program types operate out of our homeless services hub, The Cornerstone of Beaver County. They include the Pennsylvania Homeless Assistance Program and ESG prevention funds and both electric and gas customer assistance programs. When these programs are working with households they assess for other signs of housing instability and work toward addressing those issues. Such signs include: pattern of utility shut offs, inability to keep up with the rent, threats of eviction, recent loss or reduction of income, change in family composition, overcrowding in the home, and recent onset of a chronic condition.
2. When these warning signs are noticed these programs refer the at-risk-household to the needed, relevant services. Such services may include: credit counseling/budgeting; Medicaid; SNAP; cash assistance through the Dept of Human Resources; Social Security Administration; food security resources; clinical treatment; and case management. Our Information & Referral office is also located at The Cornerstone so if one of these programs does not know the appropriate resource for an at-risk-household, or is unable to link the household to the resource, then they can refer the household to the Information & Referral office down the hall. Because so many services exist under one roof at The Cornerstone, this team is able to pull together a unique service offering to best fit each at-risk-household.
3. The CoC Coordinator monitors this measure and shares the information with the Governing Board on a quarterly basis. Trends can be noticed early this way and programmatic adjustments made accordingly with the objective of reducing the number of people homeless for the first time.

3A-2. Length-of-Time Homeless as Reported in HDX. Applicants must:
(1) provide the average length of time individuals and persons in families remained homeless (i.e., the number);
(2) describe the CoC's strategy to reduce the length-of-time individuals and persons in families remain homeless;
(3) describe how the CoC identifies and houses individuals and persons in families with the longest lengths of time homeless; and
(4) provide the name of the organization or position title that is responsible for overseeing the CoC's strategy to reduce the length of time individuals and families remain homeless.
(limit 2,000 characters)

1. As reported in Measure 1.2, the average length of time homeless in FY 2017 was 125 bed nights. This was a reduction of 24 nights from FY 2016.

2. The men's ES coordinator holds office hours at our homeless services hub - where Coordinated Entry (CE) is housed. By meeting with shelter guests there, she has increased the number of them who have been screened through CE thus providing them with more opportunity to exit the shelter. Further, the CE worker monitors the wait times on any waiting lists and works with the households to: address housing barriers; link with stabilizing resources; and identify housing resources in the private market as appropriate. Once a month, the CE subcommittee meets to manage long wait times on the wait lists as well. Case conferencing helps identify opportunities for these households. Due to these wait times, the CoC is committed to securing additional funds to develop more housing opportunities. These include: 2 new project proposals in this competition; 4 proposals for the Home4Good competition; we are working with our county's Behavioral Health agency to identify ways to spend reinvestment dollars to reduce homelessness; and we continue to seek support from new corporations in our area to invest in homeless services as well.

3. With the development of our CE process we can quickly see which households have been on the waiting lists the longest. CE also screens for long periods of homelessness. It provides points for those households with long periods of homelessness thus giving them priority for the next available housing options. CE also utilizes HMIS to determine the length of time homeless when the household has already been entered into HMIS.

4. The CoC Coordinator monitors this measure and shares the information with the Governing Board on a quarterly basis. Trends can be noticed early this way and programmatic adjustments made accordingly with the objective of reducing the length of time homeless.

3A-3. Successful Permanent Housing Placement and Retention as Reported in HDX. Applicants must:
(1) provide the percentage of individuals and persons in families in emergency shelter, safe havens, transitional housing, and rapid rehousing that exit to permanent housing destinations; and
(2) provide the percentage of individuals and persons in families in permanent housing projects, other than rapid rehousing, that retain their permanent housing or exit to permanent housing destinations.

	Percentage
Report the percentage of individuals and persons in families in emergency shelter, safe havens, transitional housing, and rapid re-housing that exit to permanent housing destinations as reported in HDX.	53%

Report the percentage of individuals and persons in families in permanent housing projects, other than rapid re-housing, that retain their permanent housing or exit to permanent housing destinations as reported in HDX.	79%
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3A-3a. Applicants must:

(1) describe the CoC's strategy to increase the rate at which individuals and persons in families in emergency shelter, safe havens, transitional housing and rapid rehousing exit to permanent housing destinations; and
(2) describe the CoC's strategy to increase the rate at which individuals and persons in families in permanent housing projects, other than rapid rehousing, retain their permanent housing or exit to permanent housing destinations.

(limit 2,000 characters)

1. ES staff work to get people quickly screened through Coordinated Entry. Our men's ES coordinator holds office hours at our homeless services hub (TCBC) which helps her quickly link the shelter guests to CE and she participates in weekly case conferencing with the ESG and SSVF staff. One family ES program is run by TCBC so those clients are also quickly screened through CE. Those who score for RRH are linked to those programs that day. TH staff work with households to reduce barriers to housing such as: lack of income; unstable health; and criminal histories. They maintain positive relationships with affordable housing providers. One TH program applied for funding to tie PH vouchers to the program. For each of these programs, referrals are also made to mainstream resources to help increase income including: Social Security, Dept of Human Resources, CareerLink, Job Training, Office of Vocational Rehab. The CoC is currently SOAR training more staff to help expedite Social Security applications. TCBC is also planning a Prepared Renters Program to help increase households' readiness for moves to PH.

2. Our PSH programs recognize the first few months after admission are critical for supporting households with maintaining their housing. They conduct a thorough assessment of needs and strengths and then use this information to build a Housing Stability Plan (HSP). The HSP outlines goals and resources specific to the household's needs and strengths to assist them with stabilization. Once a household stabilizes, the PSH programs then work on linking them to income increasing resources, job training, and education as well as provide information on how to be a good tenant. As households consistently maintain in PSH, the PSH staff work with them to identify any remaining obstacles and sustainable PH options. The PSH staff also maintain contact with households after exit for a period of time to help with the transition.

3A-4. Returns to Homelessness as Reported in HDX. Applicants must report the percentage of individuals and persons in families returning to homelessness over a 6- and 12-month period as reported in HDX.

	Percentage
Report the percentage of individuals and persons in families returning to homelessness over a 6- and 12-month period as reported in HDX	8%

3A-4a. Applicants must:

(1) describe how the CoC identifies common factors of individuals and persons in families who return to homelessness;
(2) describe the CoC's strategy to reduce the rate of additional returns to

homelessness; and

(3) provide the name of the organization or position title that is responsible for overseeing the CoC's strategy to reduce the rate individuals and persons in families returns to homelessness.

(limit 2,000 characters)

1. Our housing partners recognize several factors that tend to place households at a higher risk of returning to homelessness. These include:

- when households leave the programs with no planning or even without any notice. In those cases, the programs make every effort to reach the household and offer them other housing stability resources.
- households who exit with little or no income often are not able to afford the options they exit to. Programs attempt to help households consider what they can afford when they are planning their exits to avoid this issue.
- exits that result in a change in family composition. This often means a change in household income and can leave households short on finances.
- households who terminate their formal supports upon exit (i.e. treatment providers, case management etc).

2. Programs recognize these factors and work to preemptively address them prior to exits. They work with households early on to develop a plan for what their exit may look like so they can plan accordingly with understanding what would be required to make that option sustainable. They also make every effort to help households increase their incomes through referrals to mainstream resources (Social Security, Dept. of Human Resources etc) and job training and education opportunities. The programs also educate households on the importance of maintaining their supports through the exit transition and provide information on where to turn if they notice warning signs of housing instability.

3. The CoC Coordinator monitors this measure and shares the information with the Governing Board on a quarterly basis. Trends can be noticed early this way and programmatic adjustments made accordingly with the objective of reducing the return to homelessness rate.

3A-5. Job and Income Growth. Applicants must:

(1) describe the CoC's strategy to increase access to employment and non-employment cash sources;

(2) describe how the CoC works with mainstream employment organizations to help individuals and families increase their cash income; and

(3) provide the organization name or position title that is responsible for overseeing the CoC's strategy to increase job and income growth from employment.

(limit 2,000 characters)

1. Our CoC funded programs have been working to increase access to employment and non-employment cash sources for the last year. We have enhanced partnerships with Beaver County Rehabilitation (which does job training for special populations of people), Job Training, CareerLink, and the local colleges. BCRC provided training specifically for the CoC funded programs and also our larger CoC partner meeting. Job Training regularly attends our CoC Partner meeting and shares information on new training opportunities. CareerLink sends daily job opportunities to our CoC partners. The local colleges have attended our CoC Partner meetings to discuss additional supports available at the schools to help homeless households succeed in furthering their education. The CoC funded programs make every effort to link

their participants with these resources as well as non-employment cash sources such as Social Security and Dept. of Human Resources. We are also SOAR training more staff so as to expedite Social Security applications. Also, one PSH program hired a program participant to assist with readying units for new admissions.

2. CareerLink regularly provides information to our CoC Partners on well paying jobs available in our area. For those people who do not qualify these jobs, CoC partners work to connect them with Job Training, Office of Vocational Rehab, and local colleges to provide training and education. These mainstream resources regularly attend our CoC Partner meetings to provide updates on their service offerings and to learn about the obstacles that continue to exist for homeless households.

4. The CoC Coordinator monitors this measure and shares the information with the Governing Board on a quarterly basis and with the programs regularly. Trends can be noticed early this way and programmatic adjustments made accordingly with the objective of increasing access to sources of income.

3A-6. System Performance Measures Data 05/31/2018
Submission in HDX. Applicants must enter
the date the CoC submitted the System
Performance Measures data in HDX, which
included the data quality section for FY 2017
(mm/dd/yyyy)

3B. Continuum of Care (CoC) Performance and Strategic Planning Objectives

Instructions

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

- 3B-1. DedicatedPLUS and Chronically Homeless Beds.** In the boxes below, applicants must enter:
- (1) total number of beds in the Project Application(s) that are designated as DedicatedPLUS beds; and
 - (2) total number of beds in the Project Application(s) that are designated for the chronically homeless, which does not include those that were identified in (1) above as DedicatedPLUS Beds.

Total number of beds dedicated as DedicatedPLUS	7
Total number of beds dedicated to individuals and families experiencing chronic homelessness	134
Total	141

3B-2. Orders of Priority. Did the CoC adopt the Orders of Priority into their written standards for all CoC Program-funded PSH projects as described in Notice CPD-16-11: Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Homeless Persons in Permanent Supportive Housing? Attachment Required.

Yes

3B-2.1. Prioritizing Households with Children. Using the following chart, applicants must check all that apply to indicate the factor(s) the CoC currently uses to prioritize households with children during FY 2018.

History of or Vulnerability to Victimization (e.g. domestic violence, sexual assault, childhood abuse)	<input checked="" type="checkbox"/>
Number of previous homeless episodes	<input checked="" type="checkbox"/>
Unsheltered homelessness	<input checked="" type="checkbox"/>
Criminal History	<input checked="" type="checkbox"/>
Bad credit or rental history	<input checked="" type="checkbox"/>
Head of Household with Mental/Physical Disability	<input checked="" type="checkbox"/>

3B-2.2. Applicants must:

- (1) describe the CoC's current strategy to rapidly rehouse every household of families with children within 30 days of becoming homeless;**
(2) describe how the CoC addresses both housing and service needs to ensure families successfully maintain their housing once assistance ends; and
(3) provide the organization name or position title responsible for overseeing the CoCs strategy to rapidly rehouse families with children within 30 days of becoming homeless.
(limit 2,000 characters)

1. Our Coordinated Entry (CE) screening provides points for families with children giving them a higher priority - with the goal of rehousing them within 30 days. Families who score for RRH begin working with RRH staff the same day of their CE screening. When families are not rehoused within 30 days, these are the reasons that tend to be the issue: inability to locate affordable housing, inability to produce required documents for the landlord, and criminal histories the landlords will not accept. Our homeless services hub, The Cornerstone, is developing an additional position that will assist families with addressing these issues. The Cornerstone also has a policy that states the expectation is for families to be rehoused within 30 days and has a specialist to work directly with families toward this goal. The CoC recognizes that landlord engagement and education play an important role in rehousing families within 30 days. The PA Housing Alliance has provided both landlord and CoC trainings on how to best engage each other. Our CoC remains committed to growing our landlord partners especially now with rents rising. Attending the landlord association meetings, and inviting landlords to our CoC partners meeting are strategies we use. Currently we have a landlord from the landlord association who regularly attends our CoC partner meeting.

2. Program staff assess households for service needs and housing needs. They work to link households to services that will help them stabilize, and maintain their housing. These services could include: utility assistance, food security resources, and behavioral health supports. The new position that The Cornerstone is developing will provide additional support in connecting with needed services.

3. The CoC Coordinator works with programs to incorporate the 30 day benchmark into their policies and strives to bring the necessary supports and resources into the CoC to assist with this goal.

3B-2.3. Antidiscrimination Policies. Applicants must check all that apply that describe actions the CoC is taking to ensure providers (including emergency shelter, transitional housing, and permanent supportive housing (PSH and RRH) within the CoC adhere to antidiscrimination policies by not denying admission to or separating any family members from other members of their family or caregivers based on age, sex, gender, LGBT status, marital status, or disability when entering a shelter or housing.

CoC conducts mandatory training for all CoC and ESG funded service providers on these topics.	<input type="checkbox"/>
CoC conducts optional training for all CoC and ESG funded service providers on these topics.	<input type="checkbox"/>
CoC has worked with ESG recipient(s) to adopt uniform anti-discrimination policies for all subrecipients.	<input type="checkbox"/>
CoC has worked with ESG recipient(s) to identify both CoC and ESG funded facilities within the CoC geographic area that may be out of compliance, and taken steps to work directly with those facilities to come into compliance.	<input type="checkbox"/>

CoC has sought assistance from HUD through submitting AAQs or requesting TA to resolve non-compliance of service providers.	<input type="checkbox"/>
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3B-2.4. Strategy for Addressing Needs of Unaccompanied Youth Experiencing Homelessness. Applicants must indicate whether the CoC's strategy to address the unique needs of unaccompanied homeless youth includes the following:

Human trafficking and other forms of exploitation	Yes
LGBT youth homelessness	Yes
Exits from foster care into homelessness	Yes
Family reunification and community engagement	Yes
Positive Youth Development, Trauma Informed Care, and the use of Risk and Protective Factors in assessing youth housing and service needs	Yes

3B-2.5. Prioritizing Unaccompanied Youth Experiencing Homelessness Based on Needs. Applicants must check all that apply from the list below that describes the CoC's current strategy to prioritize unaccompanied youth based on their needs.

History or Vulnerability to Victimization (e.g., domestic violence, sexual assault, childhood abuse)	<input checked="" type="checkbox"/>
Number of Previous Homeless Episodes	<input checked="" type="checkbox"/>
Unsheltered Homelessness	<input checked="" type="checkbox"/>
Criminal History	<input checked="" type="checkbox"/>
Bad Credit or Rental History	<input checked="" type="checkbox"/>

3B-2.6. Applicants must describe the CoC's strategy to increase:
(1) housing and services for all youth experiencing homelessness by providing new resources or more effectively using existing resources, including securing additional funding; and
(2) availability of housing and services for youth experiencing unsheltered homelessness by providing new resources or more effectively using existing resources.
(limit 3,000 characters)

1. Over the years, we have not had many unaccompanied homeless youth in our CoC. In fact, our child welfare agency (CYS) reports no unaccompanied homeless youth in the last year. Because they focus on family reunification goals, CYS operates family emergency shelter through a system of apartments and a Transitional Housing program. The CoC is currently submitting an application to the Pennsylvania Housing Finance Agency (through the Home4Good program) to attach permanent housing vouchers to the TH program to increase exits to PH. Additionally, we are applying for two bonuses in this competition that will also have capacity to serve homeless families. Finally, our county was selected to participate in the national County Health Rankings project (a project to address rural poverty sponsored by the Robert Wood Johnson Foundation). Our group is looking at the impact of decreasing

affordable housing on low income, precariously housed families with children. With support from this national program we intend to increase awareness and possibly leverage resources for addressing the issue.

2. Should unaccompanied unsheltered homeless youth present we refer them to CYS for assessment and screening of housing options. Of the options that the agency considers are our CoC funded programs. They have not historically seen great outcomes for 17-18 year olds in independent housing; thus, we make every effort along with CYS to help the youth identify a trusted adult with whom they can live. 18-24 year old youths have done well in our PSH and RRH programs so we would recommend these options and work with them to secure the best option for their specific strengths and needs. If the youth was in immediate need for emergency housing, CYS could possibly put them into one of their family ES units, we could utilize hotel funding if appropriate, or the child welfare agency may have to consider temporary placement. CYS employs a housing specialist who works out of our homeless services hub to streamline this coordination between CYS and the CoC resources. This partnership enables homeless youth to get the most benefit from both agencies.

3B-2.6a. Applicants must:

(1) provide evidence the CoC uses to measure both strategies in question 3B-2.6. to increase the availability of housing and services for youth experiencing homelessness;

(2) describe the measure(s) the CoC uses to calculate the effectiveness of the strategies; and

(3) describe why the CoC believes the measure it uses is an appropriate way to determine the effectiveness of the CoC's strategies.

(limit 3,000 characters)

1. Linking households to permanent housing is a known best practice for ending homelessness. By utilizing the resources we have in place such as the child welfare agency's and CoC's programs, we are working to quickly stabilize and link households to PH. Our efforts to attach PH vouchers to the TH program and to increase our RRH funds through this competition endorse this best practice. Further, by studying the issue of decreasing affordable housing, we again hope to raise awareness and funds to address the issue thereby creating more PH options for homeless youth and families. We expect to see these efforts result in shortened lengths of time (LOT) homeless. In fact, in the last year we have seen LOT homeless decrease by 19 days for households with children.

Our practice of referring unsheltered, unaccompanied homeless youth to our child welfare agency (CYS) is also grounded in best practice. We know that homeless youth face numerous unique challenges and risks such as human trafficking and victimization. Having unsheltered homeless youth assessed by the experts provides them the greatest chance of mitigating these risks. Our CoC works closely with CYS to secure housing options as quickly as possible. In fact, CYS employs a housing specialist to work out of our homeless services hub to streamline access for homeless youth and families to homeless resources and housing expertise. We have seen that since this position was established the CoC's length of time homeless for families with children has decreased by 19 days. Also since this is still a relatively new position we are establishing other local benchmarks which we will monitor future data against as well as national benchmarks.

2. By using best practices we expect both of these strategies to be effective.

We monitor HMIS data to reveal length of time homeless, returns to homelessness, and we monitor wait times, to ensure that both strategies are in fact working on the local level. And we compare the local data to national benchmarks to ensure the strategies are equally effective. Because we have very limited unsheltered, unaccompanied youth, we also look at anecdotal data on a case by case basis as well – appreciating that this data can oftentimes highlight what worked and what did not work.

3. We believe outcomes of past practices point to current best practices. By using national best practices and monitoring these practices on the local level with objective measures, we expect to accurately gauge the effectiveness of these strategies.

3B-2.7. Collaboration–Education Services. Applicants must describe how the CoC collaborates with:

- (1) youth education providers;**
 - (2) McKinney-Vento State Education Agency (SEA) and Local Education Agency (LEA);**
 - (3) school districts; and**
 - (4) the formal partnerships with (1) through (3) above.**
- (limit 2,000 characters)**

How the CoC Collaborates with:

Youth education providers – They regularly attend our CoC Partner meetings. CoC programs refer youth 0-5 to to these programs.

LEA – The CoC reaches out to the LEA when we encounter obstacles with enrolling children in school. LEA often has access to resources that our homeless families can benefit from such as back packs, hygiene items, school supplies, snacks, and clothes. The LEA attends CoC partner meetings as she is able and also serves on our Governing Board. The CoC is currently working with the LEA on data sharing so that the LEA/SEA has a more accurate understanding of homelessness in our CoC, region, and state.

School districts – the LEA has played a critical role in linking the CoC with the schools. When the LEA provides training in the schools (several times a year) she invites the CoC Coordinator to present as well. This has provided a direct link between the CoC Coordinator and the schools. The schools now often seek guidance directly from the CoC Coordinator on assisting homeless youth/families in their schools. The schools more actively participated in the PIT survey this year as well.

Formal partnerships:

Youth education providers – Head Start and Early Head Start regularly attend our CoC Partner meetings. In fact, the Early Head Start program presented at one of our meetings this year. Other youth education providers including those that address specialized needs, also occasionally attend our CoC Partner meetings and are on our CoC listserv.

LEA/SEA – Our LEA formally serves on our Governing Board guiding planning and providing expertise about youth homelessness and the protections of the McKinney-Vento Act. The LEA plays a critical role in engaging the schools in the annual Point In Time survey.

School districts – Connecting with the schools is a challenge as the points of contact there often change. With the assistance of the LEA, we are establishing better communication with the schools.

**3B-2.7a. Applicants must describe the policies and procedures the CoC adopted to inform individuals and families who become homeless of their eligibility for education services.
(limit 2,000 characters)**

The Governing Board has a policy in the CoC Policies & Procedures that states it expects CoC and ESG funded programs to advocate on behalf of homeless households with school aged children for the standards outlined in the McKinney-Vento Act. This includes reminding home schools that they are responsible for the child's education while the household is homeless regardless of where they may currently be residing. The CoC Policy also stipulates that these programs are expected to attend annual trainings conducted by the Regional Homeless Education Coordinator from the Intermediate Unit. The CoC Coordinator has also provided education to the CoC and ESG funded programs on the support that the LEA can provide should there be an issue with enrolling the children in school. As evidenced in case reviews regularly conducted in both the Coordinated Entry subcommittee and the monthly Supportive Housing Partner meetings, these homeless programs are well versed in the protections of the McKinney Vento Act. This is further substantiated when the Technical Assistance Review committee conducts annual monitoring of the programs and details about enrolling children in school are regularly noted in their case records.

3B-2.8. Does the CoC have written formal agreements, MOU/MOAs or partnerships with one or more providers of early childhood services and supports? Select "Yes" or "No". Applicants must select "Yes" or "No", from the list below, if the CoC has written formal agreements, MOU/MOA's or partnerships with providers of early childhood services and support.

	MOU/MOA	Other Formal Agreement
Early Childhood Providers	No	Yes
Head Start	Yes	Yes
Early Head Start	No	Yes
Child Care and Development Fund	No	No
Federal Home Visiting Program	No	No
Healthy Start	No	No
Public Pre-K	No	Yes
Birth to 3 years	No	Yes
Tribal Home Visiting Program	No	No
Other: (limit 50 characters)		

**3B-3.1. Veterans Experiencing Homelessness. Applicants must describe the actions the CoC has taken to identify, assess, and refer Veterans experiencing homelessness, who are eligible for U.S. Department of Veterans Affairs (VA) housing and services, to appropriate resources such as HUD-VASH, Supportive Services for Veterans Families (SSVF) program and Grant and Per Diem (GPD).
(limit 2,000 characters)**

1. The CoC has widely advertised its Supportive Services for Veteran's Families programs and it has become the main point of access for homeless veterans. Because SSVF is housed in our homeless services hub along with Coordinated Entry, immediate referrals can be made to SSVF after a CE screening. Our SSVF staff is our expert in the veteran specific resources available throughout our CoC. She is also active in Veteran's Court and participates in the local VA Clinic's outreach committee. She also conducts regular outreach both on the streets and at community events. These combined efforts of widely advertising, outreach, and the SSVF staffs' efforts in community engagement ensure that homeless veterans are quickly identified and linked to PH.

2. Veterans are screened through Coordinated Entry, and then assessed (including veteran-specific issues) through SSVF. SSVF staff then link the household to specific resources to best meet the veteran's needs. For example, in obtaining the DD214, or linking with the VA clinic to address health concerns. If a veteran chooses to go through a PSH program or TH program instead, those staff also screen for veteran specific needs and refer accordingly. The SSVF staff makes herself available to these programs to help with identifying the correct resources.

3. Our CoC does not have HUD-VASH vouchers but we are able to refer to the Pittsburgh VA should this be an appropriate resource. Nor does our CoC have a GPD program, but again referrals can be made to out of county GPDs as needed. The SSVF staff are familiar with these resources and will determine at assessment if one of these resources would be a better fit for the veteran household. We have a close working relationship with the Pittsburgh VA. They attend our monthly CoC partner meetings and they provide updates on program criteria and developments available through the Pittsburgh VA.

3B-3.2. Does the CoC use an active list or by name list to identify all Veterans experiencing homelessness in the CoC? Yes

3B-3.3. Is the CoC actively working with the VA and VA-funded programs to achieve the benchmarks and criteria for ending Veteran homelessness? Yes

3B-3.4. Does the CoC have sufficient resources to ensure each Veteran experiencing homelessness is assisted to quickly move into permanent housing using a Housing First approach? Yes

3B-5. Racial Disparity. Applicants must: Yes
(1) indicate whether the CoC assessed whether there are racial disparities in the provision or outcome of homeless assistance;
(2) if the CoC conducted an assessment, attach a copy of the summary.

3B-5a. Applicants must select from the options below the results of the CoC's assessment.

People of different races or ethnicities are more or less likely to receive homeless assistance.	<input checked="" type="checkbox"/>
People of different races or ethnicities are more or less likely to receive a positive outcome from homeless assistance.	<input type="checkbox"/>
There are no racial disparities in the provision or outcome of homeless assistance.	<input type="checkbox"/>
The results are inconclusive for racial disparities in the provision or outcome of homeless assistance.	<input type="checkbox"/>

3B-5b. Applicants must select from the options below the strategies the CoC is using to address any racial disparities.

The CoC's board and decisionmaking bodies are representative of the population served in the CoC.	<input type="checkbox"/>
The CoC has identified steps it will take to help the CoC board and decisionmaking bodies better reflect the population served in the CoC.	<input type="checkbox"/>
The CoC is expanding outreach in geographic areas with higher concentrations of underrepresented groups.	<input type="checkbox"/>
The CoC has communication, such as flyers, websites, or other materials, inclusive of underrepresented groups	<input type="checkbox"/>
The CoC is training staff working in the homeless services sector to better understand racism and the intersection of racism and homelessness.	<input type="checkbox"/>
The CoC is establishing professional development opportunities to identify and invest in emerging leaders of different races and ethnicities in the homelessness sector.	<input type="checkbox"/>
The CoC has staff, committees or other resources charged with analyzing and addressing racial disparities related to homelessness.	<input type="checkbox"/>
The CoC is educating organizations, stakeholders, boards of directors for local and national non-profit organizations working on homelessness on the topic of creating greater racial and ethnic diversity.	<input type="checkbox"/>
The CoC reviewed coordinated entry processes to understand their impact on people of different races and ethnicities experiencing homelessness.	<input type="checkbox"/>
The CoC is collecting data to better understand the pattern of program use for people of different races and ethnicities in its homeless services system.	<input type="checkbox"/>
The CoC is conducting additional research to understand the scope and needs of different races or ethnicities experiencing homelessness.	<input type="checkbox"/>
Other:	<input type="checkbox"/>

4A. Continuum of Care (CoC) Accessing Mainstream Benefits and Additional Policies

Instructions:

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

- 4A-1. Healthcare. Applicants must indicate, for each type of healthcare listed below, whether the CoC:**
- (1) assists persons experiencing homelessness with enrolling in health insurance; and**
 - (2) assists persons experiencing homelessness with effectively utilizing Medicaid and other benefits.**

Type of Health Care	Assist with Enrollment	Assist with Utilization of Benefits?
Public Health Care Benefits (State or Federal benefits, Medicaid, Indian Health Services)	Yes	Yes
Private Insurers:	Yes	Yes
Non-Profit, Philanthropic:	Yes	Yes
Other: (limit 50 characters)		

- 4A-1a. Mainstream Benefits. Applicants must:**
- (1) describe how the CoC works with mainstream programs that assist persons experiencing homelessness to apply for and receive mainstream benefits;**
 - (2) describe how the CoC systematically keeps program staff up-to-date regarding mainstream resources available for persons experiencing homelessness (e.g., Food Stamps, SSI, TANF, substance abuse programs); and**
 - (3) provide the name of the organization or position title that is responsible for overseeing the CoC's strategy for mainstream benefits. (limit 2,000 characters)**

1. The CoC Coordinator works to maintain relationships with the mainstream programs such as the Department of Human Resources (TANF, cash assistance, SNAP, Medicaid), Social Security Administration, behavioral health providers, food security resources, etc. Mainstream programs are included on our listserv so they receive updates from the CoC. These programs also use our listserv to distribute mainstream program updates and reminders to our CoC partners. Additionally, the CoC Coordinator attempts to have the mainstream programs present at our CoC Partners meetings as well. The CoC funded program staff also preliminarily assess households for which mainstream resources they could benefit from and may be eligible for. The staff then work with the household to access these resources either via internet, or face to face

meetings when needed. We do have SOAR trained workers who can also assist homeless households with their Social Security applications. The CoC is SOAR training more staff in the coming months.

2. Because of the CoC Coordinator's work to maintain relationships with the mainstream resources, they know that they can send program updates to her for distribution to the CoC partners. Further, the CoC Coordinator subscribes to advocacy newsletters that provide updates about the mainstream resources. For example, cash assistance was recently reinstated in the state of Pennsylvania. Our CoC received updates about this critical development via a homeless advocacy newsletter. The CoC Coordinator monitors advocacy newsletters, policy websites, and legislative news updates, which helps our CoC remain informed about mainstream resources that support homeless households.

3. The CoC Coordinator is responsible for overseeing the CoC strategy for making mainstream resources accessible to the people we serve.

4A-2.Housing First: Applicants must report:

- (1) total number of new and renewal CoC Program Funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC is applying for in FY 2018 CoC Program Competition; and**
- (2) total number of new and renewal CoC Program Funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC is applying for in FY 2018 CoC Program Competition that have adopted the Housing First approach—meaning that the project quickly houses clients without preconditions or service participation requirements.**

Total number of new and renewal CoC Program Funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC is applying for in FY 2018 CoC Program Competition.	6
Total number of new and renewal CoC Program Funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC is applying for in FY 2018 CoC Program Competition that have adopted the Housing First approach—meaning that the project quickly houses clients without preconditions or service participation requirements.	6
Percentage of new and renewal PSH, RRH, Safe-Haven, SSO non-Coordinated Entry projects in the FY 2018 CoC Program Competition that will be designated as Housing First.	100%

4A-3. Street Outreach. Applicants must:

- (1) describe the CoC's outreach;**
- (2) state whether the CoC's Street Outreach covers 100 percent of the CoC's geographic area;**
- (3) describe how often the CoC conducts street outreach; and**
- (4) describe how the CoC tailored its street outreach to persons experiencing homelessness who are least likely to request assistance. (limit 2,000 characters)**

1. The Outreach Committee (OC) conducts outreach throughout the year and is made up of: homeless and social services providers, formerly homeless, landlords, police, and fire depts. Members form teams and canvass specific areas of the county. The same teams cover the same areas building knowledge specific to those areas and relationships with key community members. We regularly receive referrals from police and concerned citizens. We coordinate with local fire depts to scan the river banks for homeless camps by using their rescue boats. The homeless services hub developed an outreach position to

respond in real time to calls and to visit places that homeless people tend to be such as soup kitchens.

2. The OC works to cover the entire CoC. For the PIT survey we used the Salvation Army's disaster response truck to more thoroughly canvass the rural areas. And the outreach teams that repeatedly cover these rural areas continue to grow their knowledge about places to search. By talking with community members about the objective of outreach, we increased awareness and placed more eyes on the streets throughout the county for people who are homeless. Also with the use of the fire depts rescue boats, we are able to scan difficult to navigate river banks and the vast majority of the county's river banks in a short period of time.

3. The OC conducts outreach quarterly. The individual teams often conduct outreach more frequently when harsh weather conditions are forecasted and if they receive information about a homeless person in their area. Some teams go out monthly. The outreach position will conduct some form of outreach daily.

4. The OC searches secluded places such as under bridges, along the rivers, and in the woods. At abandoned buildings we will leave comfort items and information on services if we suspect that someone is staying there. We revisit the sites to see if the items have been used confirming their presence for future engagement.

4A-4. Affirmative Outreach. Applicants must describe:

(1) the specific strategy the CoC implemented that furthers fair housing as detailed in 24 CFR 578.93(c) used to market housing and supportive services to eligible persons regardless of race, color, national origin, religion, sex, gender identify, sexual orientation, age, familial status or disability; and

**(2) how the CoC communicated effectively with persons with disabilities and limited English proficiency fair housing strategy in (1) above.
(limit 2,000 characters)**

1. The CoC employs a Fair Housing officer to act as a resource for people with Fair Housing concerns. He regularly provides Fair Housing education to our CoC Partners thereby developing Fair Housing advocates throughout the CoC. Further the Fair Housing Law Center (part of Southwestern PA Legal Services) is an active CoC partner and regularly attend the monthly CoC partner meeting. They provide education and training to both our CoC partners as well as to local landlords. They also conduct testing, follow up on complaints, and provide legal representation when fair housing violations are identified. The Fair Housing Law Center also prepared a Fair Housing Impediments study which guides our planning and development.

2. The CoC works with the Fair Housing Law Center to get printed materials on fair housing in other languages. Further the Fair Housing Law Center has a language line to assist with translation services for fair housing issues with limited English speaking households. Our local Fair Housing officer can also use community resources and resources available through the county when translation services are needed.

4A-5. RRH Beds as Reported in the HIC. Applicants must report the total number of rapid rehousing beds available to serve all household types as reported in the Housing Inventory Count (HIC) for 2017 and 2018.

	2017	2018	Difference
FY2018 CoC Application			
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RRH beds available to serve all populations in the HIC	0	18	18
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4A-6. Rehabilitation or New Construction Costs. Are new proposed project applications requesting \$200,000 or more in funding for housing rehabilitation or new construction? No

4A-7. Homeless under Other Federal Statutes. Is the CoC requesting to designate one or more of its SSO or TH projects to serve families with children or youth defined as homeless under other Federal statutes? No

4B. Attachments

Instructions:

Multiple files may be attached as a single .zip file. For instructions on how to use .zip files, a reference document is available on the e-snaps training site:
<https://www.hudexchange.info/resource/3118/creating-a-zip-file-and-capturing-a-screenshot-resource>

Document Type	Required?	Document Description	Date Attached
1C-5. PHA Administration Plan–Homeless Preference	No	PHA Homeless Pref...	09/04/2018
1C-5. PHA Administration Plan–Move-on Multifamily Assisted Housing Owners' Preference	No		
1C-8. Centralized or Coordinated Assessment Tool	Yes	Coordinated Entry...	09/04/2018
1E-1. Objective Criteria–Rate, Rank, Review, and Selection Criteria (e.g., scoring tool, matrix)	Yes	2018 Rating & Ran...	09/04/2018
1E-3. Public Posting CoC-Approved Consolidated Application	Yes		
1E-3. Public Posting–Local Competition Rate, Rank, Review, and Selection Criteria (e.g., RFP)	Yes	Public Post - Pri...	09/06/2018
1E-4. CoC's Reallocation Process	Yes	Reallocation Policy	09/06/2018
1E-5. Notifications Outside e-snaps–Projects Accepted	Yes	Notification Outs...	09/04/2018
1E-5. Notifications Outside e-snaps–Projects Rejected or Reduced	Yes	Notification Outs...	09/04/2018
1E-5. Public Posting–Local Competition Deadline	Yes	Public Posting - ...	09/06/2018
2A-1. CoC and HMIS Lead Governance (e.g., section of Governance Charter, MOU, MOA)	Yes	Governance Charte...	09/06/2018
2A-2. HMIS–Policies and Procedures Manual	Yes	HMIS Policies and...	09/06/2018
3A-6. HDX–2018 Competition Report	Yes	2018 HDX Competit...	08/29/2018
3B-2. Order of Priority–Written Standards	No	Order of Priority	09/06/2018

3B-5. Racial Disparities Summary	No	Racial Disparity ...	09/06/2018
4A-7.a. Project List–Persons Defined as Homeless under Other Federal Statutes (if applicable)	No		
Other	No		
Other	No		
Other	No		

Attachment Details

Document Description: PHA Homeless Preference Policy

Attachment Details

Document Description:

Attachment Details

Document Description: Coordinated Entry Screening Tool

Attachment Details

Document Description: 2018 Rating & Ranking Tools

Attachment Details

Document Description:

Attachment Details

Document Description: Public Post - Priority List Ranking Criteria &

Process

Attachment Details

Document Description: Reallocation Policy

Attachment Details

Document Description: Notification Outside of e-snaps - Projects
Accepted

Attachment Details

Document Description: Notification Outside of e-snaps - Projects
Rejected

Attachment Details

Document Description: Public Posting - Local Competition Deadline

Attachment Details

Document Description: Governance Charter (HMIS Role can be found in
HMIS Manual attached to 2A.2)

Attachment Details

Document Description: HMIS Policies and Procedures Manual

Attachment Details

Document Description: 2018 HDX Competition Report

Attachment Details

Document Description: Order of Priority

Attachment Details

Document Description: Racial Disparity Analysis

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description:

Submission Summary

Ensure that the Project Priority List is complete prior to submitting.

Page	Last Updated
1A. Identification	08/26/2018
1B. Engagement	08/27/2018
1C. Coordination	09/06/2018
1D. Discharge Planning	09/06/2018
1E. Project Review	08/28/2018
2A. HMIS Implementation	09/06/2018
2B. PIT Count	08/28/2018
2C. Sheltered Data - Methods	09/05/2018
3A. System Performance	09/06/2018
3B. Performance and Strategic Planning	09/06/2018
4A. Mainstream Benefits and Additional Policies	09/06/2018
4B. Attachments	Please Complete

FY2018 CoC Application	Page 52	09/07/2018
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Submission Summary

No Input Required

Housing Authority of the County of Beaver

Preferences Detailed in Public Housing Admissions and Continued Occupancy Policy

9.0 TENANT SELECTION AND ASSIGNMENT PLAN

9.1 PREFERENCES

The Housing Authority of the County of Beaver will select families based on the following preferences within each bedroom size category:

A. Displaced person(s)

1. An applicant is or will be involuntarily displaced if the applicant has vacated or will have to vacate his housing unit as a result of one or more of the following actions:

- i. A disaster, such as fire, or flood, that results in the uninhabitability of an applicant's unit;
- ii. Activity carried on by an agency of the United States or by any State or Local governmental body or agency in connection with code enforcement or a public improvement or development program;
- iii. Domestic violence of a recent or continuing nature that results in the applicant vacating a unit because of domestic violence or living in a unit with an individual who engages in such domestic violence. Domestic violence means actual or threatened physical violence directed against one or more members of the applicant by family by a spouse or other members of the applicant's household. For an applicant to qualify as involuntarily displaced because of domestic violence, the Housing Authority of the County of Beaver must determine that the domestic violence occurred recently or is of a continuing nature through certification by the Women's Center of Beaver County, and the applicant must certify that the person who engaged in such violence will not reside with the applicant family. If the applicant family is admitted, the Housing Authority of the County of Beaver may deny or terminate assistance to the family for breach of their certification;

- iv. Homelessness includes any person or family that lacks a fixed, regular and adequate nighttime residence and also has a primary nighttime residence that is a supervised publicly or privately operated shelter designated to provide temporary living accommodations (including welfare hotels, congregate shelters and transitional housing), or an institution providing temporary residence for persons intended to be institutionalized, or is a public or private place not designated for or intended for use as sleeping accommodations for human beings. A homeless family does not include individuals imprisoned or detained by an Act of Congress or State law.

B. Working families

1. A preference will be given to working families in the selection of applicants. Working families are defined as families where all or part of the family's total income is derived from wages and earned income and where the head, spouse or sole member is employed by a third party for at least the minimum wage for a minimum of 20 hours a week for a minimum of 52 weeks.
- 2.
3. Working families also include those families where a family member is enrolled in either job training or educational programs with the ultimate goal of securing full-time employment and self-sufficiency.
4. Applicant household whose head, spouse, or sole member is 62 or older or is receiving social security disability, supplemental security income, disability benefits, or any other payments based on individual's inability to work is also eligible for this preference.

C. Veterans' Preference

As established by an amendment to the Housing Authorities Law of 1937 known as Act 188 of October 27, 2014, the General Assembly of the Commonwealth of Pennsylvania hereby enacted the following:

"An authority shall provide a preference for any active duty United States service member or veteran. The preference shall extend to:

1. The household of which the service member or veteran is a member.
2. The surviving household members of a deceased service member or veteran who died of service-connected causes, provided:
 - (i) The death occurred during active duty service or within five years of discharge from service.
 - (ii) The death occurred not more than five years from the date of application for housing.

The preference established by this section shall be cumulative with any other preference allowed by the housing authority for which the applicant qualifies, so that service members or veterans have priority over nonservice members and nonveterans within each preference category.

Nothing in this section shall be construed to supersede:

Any Federal law or regulation relating to or local preferences adopted pursuant to Federal law. Any Federal law or regulation concerning tenant eligibility and selection or local criteria adopted pursuant to Federal law."

D. All other applicants

Based on the above preferences, all families in preference C will be offered housing before any families in preference A, preference A families will be offered housing before any families in preference B, and preference B families will be offered housing before any families in preference D.

The date and time of application will be noted and utilized to determine the sequence within the above-prescribed preferences.

Notwithstanding the above, families who are elderly, disabled, or displaced will be offered housing before other single persons.

Buildings Designed for the Elderly and Disabled: Preference will be given to elderly and disabled families. If there are no elderly or disabled families on the list, preference will then be given to near-elderly families. All such families will be selected from the waiting list using the preferences as outlined above.

Accessible Units: When an accessible unit becomes vacant, that unit shall be offered first to an occupant of another unit of the same development, or another public housing development, having handicaps requiring the accessibility features of the vacant unit and occupying a unit not have such features; or if no such occupant exists, then that unit shall be offered to an eligible qualified applicant on the waiting list having a handicap requiring the accessibility features of the vacant unit. Applicants for these units will be selected utilizing the same preference system as outlined above. If there are no applicants who would benefit from the accessible features, the units will be offered to other applicants in the order that their names come to the top of the waiting list. Such applicants, however, must sign a release form stating they will accept a transfer (at their own expense) if, at a future time, a family requiring an accessible feature applies. Any family required to transfer will be given a 30-day notice.

Beaver County Continuum of Care
Coordinated Entry
Standardized Screening Tool

GENERAL INFORMATION

First Name		Last Name	
Nickname		Social Security Number	
How old are you?	Date of Birth?	Has Consented to Participate? Yes ____ No ____	
What's the best way to contact you? Phone/Text: _____ Is it okay to leave a message?: _____ Social Media: _____ Email: _____ Location (if your phone is turned off is there somewhere we can find you or leave a message): _____ Times: _____ Secondary contact person: _____			
FAMILY CONFIGURATION (If a family unit answer the family unit questions below) Number and age of adults: Number and age of dependent children: Is anyone pregnant?: Is anyone a veteran?: If pregnant, add 1 point If a veteran, add 1 point If a family with 4 or more dependent children, add 1 point If CYS involvement, add 1 point If over 60, add 1 point If HoH of family is under 24 with a child under the age of 5, add 1 point If HoH is 18-22 and transitioning out of foster care, add 1 point			POINTS
A lot of people we see have been hurt by their partners or family members. Is this a safe time/place for me to ask you about this? Have you ever been hurt by your partner or family members? <i>If yes, 1 point and follow "DV Protocol".</i>			
GENERAL INFORMATION total score			

PREVENTION/DIVERSION

1. Where did you sleep last night? <i>If a hotel, who paid for it? If ES, Emerg Lodging, or BC On-Call skip to Section A</i>	
2. Was it a safe location?	
3. Why did you leave?	
4. Could you stay there again tonight? What would you need to make that happen?	

Beaver County Continuum of Care
Coordinated Entry
Standardized Screening Tool

If safe arrangements can be made at the previous night's location, stop this screening and divert the household to prevention services: HAP, ESG, SSVF, St. Vincent DePaul. If the person is in a DV situation and are referred to prevention services, also notify the Compliance Officer at The Cornerstone (724.846.6400). If safe arrangements cannot be made make emergency housing referral: Crossroads, Women's Center, BC On-Call, Emergency Lodging Program AND CONTINUE WITH SCREENING.

A. HISTORY OF HOUSING & HOMELESSNESS Spend some time asking about homelessness in a few ways, i.e: what led to this point, when did you last have a lease, where are you planning on sleeping tonight, where do you feel safe, etc. It may help to draft a timeline.

<i>For the first two questions, if the person has experienced a continuous year homeless or 4 episodes of homelessness in 3 years give two points</i>	Response	Points
1. What is the total time you have lived on the streets or in a shelter?		
2. In the past 3 years, how many times have you been homeless? (being homeless includes living outside, being in a shelter, living a car, then, abandoned building, or a place not meant for human habitation).		
3. I am going to read types of places that people sleep. In the past 6 months, please tell me which one that you sleep at most often. (Give 1 point for the answer other than shelter)	<input type="checkbox"/> Shelter <input type="checkbox"/> Outside <input type="checkbox"/> Car/RV <input type="checkbox"/> Park or riverbank <input type="checkbox"/> Hotel <input type="checkbox"/> Other:	
4. Are there any reasons that you cannot use one of the emergency shelters?	<input type="checkbox"/> Yes (give 1 pt) <input type="checkbox"/> No (give 0 pts)	
5. When you were homeless before did you ever receive temporary assistance to help you move back into housing such as temporary rental assistance, deposits, help with moving costs, or Permanent Supportive Housing etc? <i>If YES ask if they received that kind of assistance once, or if it happened more than once. Ask if you can check HMIS to see if they've been served before?</i>	<input type="checkbox"/> Yes 1+ (give 2 pts) <input type="checkbox"/> Yes once (give 1 pt) <input type="checkbox"/> No (give 0 pts)	
6. Do you have any evictions? Have you been asked to leave your rental apartment or did the landlord use legal papers to ask you to leave?	If yes go to next question	
7. How many evictions do you have?	<input type="checkbox"/> 1-2 (give 1 pts) <input type="checkbox"/> 3+ (give 2 pts)	
8. Do you owe any landlords money?	<input type="checkbox"/> Yes (give 1 pt) <input type="checkbox"/> No (give 0 pts)	
9. Do you have a criminal history that includes:		

Beaver County Continuum of Care
Coordinated Entry
Standardized Screening Tool

- Offences that make it hard to find housing (arson, sex offender, made meth)? If yes give, 3 points - Drug offences or crimes against people or property? If yes, give 2 points - Minor moving violations, misdemeanors etc? If yes, give 1 point		
Housing & Homeless total score		

B. RISKS Explain that you are going to ask some questions about interactions in the last 6 months with health and emergency services. State you can help them figure out when 6 months ago was if needed.

<i>Total the number of interactions across questions 10-14 then score 1 point for 1-3 experiences ; 2 pts for 3-7; and 3 pts for 8+ experiences</i>	Response	Points
10. In the last 6 mos, how many times have you been to the emergency room?		
11. In the last 6 mos, how many times have you had any interaction with police?		
12. In the last 6 mos, how many times have you been taken to the hospital in an ambulance?		
13. In the last 6 mos, how many times have you used a crisis service, including D&A services, homeless hotline, or suicide hotlines?		
14. In the last 6 mos, how many times have you been hospitalized for MH, D&A, and/or physical health?		
<i>If Yes to question 15 or 16, then score 1 point</i>		
15. Have you been attacked (physically or verbally), robbed, or beaten up since becoming homeless?		
16. Have you threatened or tried to harm yourself or anyone else in the last year?		
17. Do you have any legal stuff going on right now that may result in you being locked up or having to pay fines? Do you have any pending charges? Are you on probation? Or are you paying any fines?	___ Yes (give 1 pt) ___ No (give 0 pts)	
18. Does anyone in the household, beside you, have a physical, mental health, or developmental disability?	___ Yes (give 1 pt) ___ No (give 0 pts)	
<i>If yes to questions 19 or 20, then score 1 point</i>		
19. Does anybody force or trick you to do things that you do not want to do or that are uncomfortable?		
20. Do you ever do things that may be considered risky like exchange sex for money, run drugs for someone, have unprotected sex with someone you don't really know, share a needle, or anything like that?		
RISKS total score		

C. SOCIALIZATION & DAILY FUNCTIONS

<i>If YES to question 21 or NO to questions 22 or 23, then score 1 point</i>	Response	Points
21. Is there anybody who thinks you owe them money (such as family, friends, landlords, utilities, PHA)?		
22. Do you have any money coming in on a regular basis (formal or informal)?		
23. Do you have enough money to meet all of your expenses on a monthly basis?		

Beaver County Continuum of Care
Coordinated Entry
Standardized Screening Tool

24. What is your monthly income right now?	- 30% AMI or higher (give 0 pts) - 16-29% AMI (1 pt) - 15% AMI or lower (give 2 pts) - 0 income (give 3 pts)	
25. Do you have any planned activities each day other than just surviving that bring you happiness and fulfillment? <i>If no, give 1 point</i>		
26. Do you have anyone who you can depend on? <i>If no, give 1 point</i>		
<i>If Yes to question 27 or 28, then score 1 point</i>		
27. Do you have any friends, family or other people in your life out of convenience or necessity but you do not like their company?		
28. Do you have any friends, family, or other people in your life who ever take your money, borrow cigarettes, use your drugs, drink your alcohol, or get you to do things you really don't want to do?		
<i>OBSERVE ONLY. If Yes, then score 1 point</i>		
29. Do you detect signs of poor hygiene or daily living skills? Or has it been reported to you by a reputable source?		
Socialization & Daily Functions total score		

D. WELLNESS

Total the responses for questions 30-32 in the Medical Score box.	Response	Points
30. Where do you usually go for healthcare or when you're not feeling well? If the response is DOES NOT GO FOR CARE or HOSPITAL, score 1 point.	<input type="checkbox"/> PCP <input type="checkbox"/> Clinic <input type="checkbox"/> VA <input type="checkbox"/> Other: <input type="checkbox"/> Hospital <input type="checkbox"/> Does Not Go For Care	Medical Score
31. Do you have now, have you ever had, or has a healthcare provider ever told you have any on-going physical health issues? If yes, how many health issues? Score: 1 issue = 1point; 2-3 issues = 2points; 4 or more issues = 3 points		
32. OBSERVE ONLY. Do you observe signs of a serious health condition? Or has it been reported to you by a reputable source?	If yes, 1 pt	
For questions 33-38, score 1 point for each yes response		
33. Have you consumed alcohol and/or drugs almost every day or every day for the past month?		D&A Score
34. Have you ever used illegal injection drugs?		
35. Have you blacked out because of your alcohol or drug use in the past month?		
36. Have you ever had problematic drug or alcohol use, abused drugs or		

Beaver County Continuum of Care
Coordinated Entry
Standardized Screening Tool

alcohol, or told that you do?		
37. Have you ever been treated for drug or alcohol problems and returned to drinking or using drugs?		
38. OBSERVE ONLY. Do you observe signs of problematic alcohol or drug use? Or has it been reported to you by a reputable source?		
For questions 39-47, score 1 point for each yes response.		
39. Have you ever been taken to a hospital against your will for a mental health reason?		Mental Health Score
40. Gone to the ER because you weren't feeling 100% well emotionally or because of your nerves?		
41. Spoken with a psychiatrist, psychologist or other mental health professional in the last 6 months because of your mental health – whether that was voluntary or because someone insisted that you do so?		
42. Have you ever had or been told you have a brain injury, head trauma, learning disability, or developmental disability? Do you have an IEP?		
44. Do you have any problems concentrating and/or remembering things that negatively impacts your life?		
45. OBSERVE ONLY. Do you detect signs of severe, persistent mental illness or severely compromised cognitive functioning? Or has it been reported to you by a reputable source?		
If Medical Score is at least 1, AND D&A Score is 1 AND the Mental Health Score is 1, then score 1 additional point here for tri-morbidity.		
46. Have you had any medicines prescribed to you by a doctor that you do not take (i.e. you sold them, they were stolen or misplaced, you discontinued use, or the scripts were never filled)?	If yes, give 1 point	
47. Have you experienced any emotional, physical, psychological, sexual, or other type of abuse or trauma in your life which contributed to your homelessness?	If yes, give 1 point	
WELLNESS total score		

SCORING SUMMARY

DOMAIN	SUBTOTAL	SCORING
General Information		PSH: 22+
History of Housing & Homelessness		
Risks		
Socialization & Daily Functions		TH: 17-21
Wellness		RRH: 0-16
TOTAL		

ADDITIONAL NOTES:

PERSON COMPLETING THIS TOOL: _____

DATE: _____

2018 PA-603 Continuum of Care Program Competition
PSH and TH Renewal Rating & Ranking Tool

Program Name: _____

PSH: _____ **TH:** _____

Measure & Data Source	Point Structure	Pts Given
SEVERITY OF NEED		
1. Evidence of addressing severe needs of participants (Renewal 3B)	1 point for serving people with at least 2 of these characteristics: - low or no income - substance abuse - history of victimization - criminal histories - chronic homeless status - poor rental history - no interest in supportive services	
2. Evidence of program commitment to addressing severity of need (CoC Summary Report, Table 1 - <i>Policies & Procedures</i>)	2 points for 90% or higher 1 point for 80-89% 0 points for less than 80%	
3. Type of Population Served (Renewal 3B, 5B)	1 point for serving at least 2 of these populations: - chronically homeless - victims of domestic violence - families - Unaccompanied youth - Youth transitioning from foster care - veterans - people with substance use	

RENEWAL APPLICATION DETAILS

4. Provides a clear and concise description of the scope of the project. (Renewal 3B)	Give 1 point each for mentioning: - community need for program - target population - projected outcomes - coordination with partners - why it should be CoC funded - plan for addressing housing and service needs	
5. Budget includes 25% match & commitment letter (Renewal 6D)	Yes – 2 points No – 0 points	
6. Mentions only accepting referrals from Coordinated Entry (Renewal 3B)	Yes – 2 points No – 0 points	

**2018 PA-603 Continuum of Care Program Competition
PSH and TH Renewal Rating & Ranking Tool**

MONITORING

7. Was project's APR submitted on time? (CoC Summary Report, Table 2)	Yes – 2 points No – 0 points	
8. Did project demonstrate sound fiscal practices including maintaining consistent draw downs? (CoC Summary Report, Table1 - <i>Fiscal Practices</i>)	2 points for 95% or higher 1 point for 90-95% 0 points for less than 90%	
9. Unit Utilization Rate (CoC Summary Report, Table 3)	- 2 points for 90% or higher - 1 point if 80-89% - 0 points for below 80%	
10. Were any project funds recaptured (CoC Summary Report, Table 4)	No – 2 points Yes – 0 points	
11. Cost Effectiveness (CoC Summary Report, Table 5)	<i>For PSH:</i> 2 points if equal or less than \$6,476 (CoC PSH Avg) <i>For PSH:</i> 1 point if within \$1000 of CoC PSH Avg. <i>For TH:</i> 2 points if equal or less than \$16,303 (National Avg*)	

PERFORMANCE OUTCOMES

12. Access to mainstream resources (Renewal 3B, 4A)	- 1 point for mentioning 3 resources to refer clients to (3B) - 2 points for SOAR trained (4A) - 1 point for annual follow ups (4A)	
13. Exited households move onto permanent housing (CoC Summary Report, Table 6)	<i>For PSH:</i> 2 points if equal to or above 88% (2017 Sys PM) <i>For PSH:</i> 1 point if 80%-87% <i>For TH:</i> 2 points if equal to or above 61% (2017 Sys PM)	
14. Rate of return to homelessness within 6 months of exit to PH (CoC Summary Report, Table 7)	<i>For PSH:</i> 2 points for 3% or less rate (2017 Sys PM) <i>For PSH:</i> 1 points for 4-6% <i>For TH:</i> 2 points for 0% (2017 Sys PM)	
15. Increased income (CoC Summary Report, Table 8)	- 2 points if equal or greater than CoC Average of 48% - 1 point if within 5 points of the CoC Average	

**2018 PA-603 Continuum of Care Program Competition
PSH and TH Renewal Rating & Ranking Tool**

CoC PARTICIPATION

16. Attended majority of monthly Coalition meetings (CoC Summary Report, Table 9)	Yes – 2 points No – 0 points	
17. Attended majority monthly Supportive Housing Program mtgs (CoC Summary Report, Table 10)	Yes – 2 points No – 0 points	
18. Attended the HMIS and CE tool training (CoC Summary Report, Table 11)	Yes – 2 points No – 0 points	
19. Attended the majority of the CE Planning subcommittee meetings (CoC Summary Report, Table 12)	Yes – 2 points No – 0 points	

Total Points Awarded:

Total Points Available: 42

Reviewer's Comments:

Reviewer: _____

Date: _____

Data Sources

* Housing & Urban Development, *Cost Association with First Time Homelessness For Families and Individuals*, 2010

CoC Summary Report includes data from: HMIS; 2017 Systems Performance Measures Report; program's most recently submitted Annual Progress Reports; 2018 Technical Assistance & Review monitoring; and meeting sign-in sheets

2018 PA-603 Continuum of Care Program competition

Regular Bonus Project Rating & Ranking Tool

Program Name: Beaver County Salvation Army Rapid Re-Housing Bonus

Measure & Data Source	Point Structure	Pts Given
SEVERITY OF NEED		
1. Characteristics of Need (Application 3B)	1 point for serving people with at least two of these characteristics: <ul style="list-style-type: none"> - low or no income - substance abuse - history of victimization - criminal histories - chronic homeless status - poor rental history - no interest in supportive services - mental health 	
2. Type of Population Served (Application 3B, 5B)	1 point for serving at least two of these populations: <ul style="list-style-type: none"> - chronically homeless - victims of domestic violence - families and youth - veterans - people with substance use 	

APPLICATION DETAILS

3. Provides a clear and concise description of the scope of the project. (Application 3B)	Give 1 point each for mentioning: <ul style="list-style-type: none"> - community need for program - target population - projected outcomes - coordination with partners - why it should be CoC funded - plan for addressing housing and service needs 	
4. Budget includes 25% match & commitment letter (Application 6I)	Yes – 2 points No – 0 points	
5. Mentions participating in Coordinated Entry/Assessment (Application 3B.3)	Yes – 2 points No – 0 points	
6. Does the application provide a timeline for starting the program in a timely manner? (Application 3B.2)	Yes – 2 points No – 0 points	
7. Does the application demonstrate sound fiscal practices? (Application 2B:1-3 , CoC Summary Table 5)	Yes – 2 points No – 0 points	

**2018 PA-603 Continuum of Care Program competition
Regular Bonus Project Rating & Ranking Tool**

8. Does the agency show capacity to manage a federal grant? (App. 2B)	Yes – 2 points No – 0 points	
9. Does the agency have sufficient experience with homelessness? (Application 2B)	Yes – 2 points No – 0 points	
10. Cost Effectiveness (CoC Summary Report, Table 5)	- 2 points if equal or less than \$4,100 (National RRH Avg)* - 1 point if within \$1000 of National RRH Avg.	

PROJECTED OUTCOMES

11. Access to mainstream resources (Application 3B, 4A)	- 1 point for mentioning 3 resources to refer clients to (3B) - 2 points for SOAR trained (4A) - 1 point for regular follow up (4A)	
12. Does the project have a plan for moving exited households onto permanent housing (Application 3B, 4A:2)	Yes – 2 points No – 0 points	
13. Does the project have a plan for assisting participants with Increasing their income? (Application 3B, 4A:3)	Yes – 2 points No – 0 points	

CoC PARTICIPATION

14. Does the application mention participating in CoC activities - Coalition and supportive housing partners meetings, HMIS training etc? (Application 3B)	Yes – 2 points No – 0 points	
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Total Points Available: 32

Total Points Awarded:

Reviewer's Comments

Reviewer: _____

Date: _____

Data Sources

**National Alliance to End Homelessness, "Rapid Re-housing: A History and Core Components", 2014*

2018 PA-603 Continuum of Care Program competition
DV BONUS Rating & Ranking Tool

Program Name: Safely Home

Measure & Data Source	Point Structure	Pts Given
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SEVERITY OF NEED

1. Characteristics of Need (Application 3B)	1 point for serving people with at least 2 of these characteristics: - low or no income - substance abuse - history of victimization - criminal histories - chronic homeless status - poor rental history - no interest in supportive services	
2. Type of Population Served (Application 3B, 5B)	1 point for serving at least 2 of these populations: - chronically homeless - victims of domestic violence - families and youth - veterans - people with substance use	

APPLICATION DETAILS

3. Provides a clear and concise description of the scope of the project. (Application 3B)	Give 1 point each for mentioning: - community need for program - target population - projected outcomes - coordination with partners - why it should be CoC funded - plan for addressing housing and service needs	
4. Budget includes 25% match & commitment letter (Application 6I)	Yes – 2 points No – 0 points	
5. Mentions participating in Coordinated Entry/Assessment (Application 3B.3)	Yes – 2 points No – 0 points	
6. Does the application provide a timeline for starting the program in a timely manner? (Application 3B.2)	Yes – 2 points No – 0 points	
7. Does the application demonstrate sound fiscal practices? (Application 2B:1-3 , CoC Summary Table 5)	Yes – 2 points No – 0 points	

2018 PA-603 Continuum of Care Program competition
DV BONUS Rating & Ranking Tool

8. Does the agency show capacity to manage a federal grant? (App. 2B)	Yes – 2 points No – 0 points	
9. Does the agency have sufficient experience with homelessness? (Application 2B)	Yes – 2 points No – 0 points	
10. Cost Effectiveness (CoC Summary Report, Table 5)	- 2 points if equal or less than \$4,100 (National RRH Avg)* - 1 point if within \$1000 of National RRH Avg.	

PROJECTED OUTCOMES

11. Access to mainstream resources (Application 3B, 4A)	- 1 point for mentioning 3 resources to refer clients to (3B) - 2 points for SOAR trained (4A) - 1 point for regular follow up (4A)	
12. Does the project have a plan for moving exited households onto permanent housing (Application 4A)	Yes – 2 points No – 0 points	
13. Does the project have a plan for assisting participants with Increasing their income? (Application 4A)	Yes – 2 points No – 0 points	
14. Does the project demonstrate sufficient protocol to improve the safety of people served in the program? (Application 3B)	Yes – 2 points No – 0 points	

CoC PARTICIPATION

15. Does the application mention participating in CoC activities - Coalition and supportive housing partners meetings, HMIS training etc? (Application 3B)	Yes – 2 points No – 0 points	
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Total Points Available: 34

Total Points Awarded:

Reviewer's Comments:

Reviewer: _____

Date: _____

Data Sources

**National Alliance to End Homelessness, "Rapid Re-housing: A History and Core Components", 2014*

**2018 PA-603 Continuum of Care Program competition
Homeless Management Information System Rating & Ranking Tool**

Measure & Data Source	Point Structure	Pts Given
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RENEWAL APPLICATION DETAILS

1. Provides a clear and concise description of the scope of the project. (Renewal 3B)	Give 1 point each for mentioning: - projected outcomes - coordination with partners - why it should be CoC funded - community need for project - design & implementation	
2. Budget includes 25% match & commitment letter (Renewal 6D)	Yes – 2 points No – 0 points	
3. Does HMIS collect all Universal Data Elements? (Renewal 4A:1a)	Yes – 2 points No – 0 points	
4. Does HMIS produce all HUD reports and data as needed for HUD reporting? (Renewal 4A:2a)	Yes – 2 points No – 0 points	
5. Does HMIS produce an unduplicated count of clients receiving CoC services? (Renewal 4A, 4)	Yes – 2 points No – 0 points	
6. Does HMIS have a staff person responsible for insuring the implementation meets all security standards as required by HUD? (Renewal 4A, 5)	Yes – 2 points No – 0 points	

MONITORING

7. Was project's APR submitted on time? (CoC Summary Report, Table 2)	Yes – 2 points No – 0 points	
8. Were any project funds recaptured (CoC Summary Report, Table 4)	No – 2 points Yes – 0 points	
9. Does the HMIS grant present as cost Effective? (CoC Summary Report, Table 5)	Yes – 2 points No – 0 points	
10. Overall TAR Score (CoC Summary Report, Table 1)	2 points for 90% or higher 1 point for 80-89% 0 points for less than 80%	

2018 PA-603 Continuum of Care Program competition
Homeless Management Information System Rating & Ranking Tool

11. Does the project focus on the issue of data quality? (Renewal 3B)	Yes – 2 points No – 0 points	
---	---------------------------------	--

CoC PARTICIPATION

11. Attended majority of monthly Coalition meetings (CoC Summary Report, Table 9)	Yes – 2 points No – 0 points	
12. Attended the annual HMIS and Coordinated Entry tool training (CoC Summary Report, Table 11)	Yes – 2 points No – 0 points	

Total Points Awarded:

Total Points Available: 29

Reviewer's Comments:

Reviewer: _____

Date: _____

Data Sources

* Housing & Urban Development, *Cost Association with First Time Homelessness For Families and Individuals*, 2010

CoC Summary Report includes data from: HMIS; 2017 Systems Performance Measures Report; program's most recently submitted Annual Progress Reports; 2018 Technical Assistance & Review monitoring; and meeting sign-in sheets

2018 PA-603 Continuum of Care Program competition
Coordinated Entry Rating & Ranking Tool

Measure & Data Source	Point Structure	Pts Given
-----------------------	-----------------	-----------

RENEWAL APPLICATION DETAILS

1. Provides a clear and concise description of the scope of the project. (Renewal 3B)	Give 1 point each for mentioning: - community need for program - target population - projected outcomes - coordination with partners - why it should be CoC funded - plan for addressing housing and service needs	
2. Budget includes 25% match & commitment letter (Renewal 6D)	Yes – 2 points No – 0 points	
3. Does CE make an effort to be accessible to those who may not reach out for help? (3B:4b, 4c)	Yes – 2 points No – 0 points	
4. Does CE prioritize those with highest barriers? (3B: 3b)	Yes – 2 points No – 0 points	
5. Does CE have a process for linking HHs to services? (3B)	Yes – 2 points No – 0 points	

MONITORING

6. Was project's APR submitted on time? (CoC Summary Report, Table 2)	Yes – 2 points No – 0 points	
7. Were any project funds recaptured (CoC Summary Report, Table 4)	No – 2 points Yes – 0 points	
8. Does the CE grant present as cost Effective? (CoC Summary Report, Table 5)	Yes – 2 points No – 0 points	
9. TAR Overall Score (CoC Summary Report, Table 1)	2 points for 90% or higher 1 point for 80-89% 0 points for less than 80%	

2018 PA-603 Continuum of Care Program competition Coordinated Entry Rating & Ranking Tool

OUTCOMES

10. Exited households to housing (CoC Summary Report, Table: Coordinated Entry)	2 pts for 75% or higher 1 pt for 50%-74%	
11. Exited households to PH (CoC Summary Report, Table: Coordinated Entry)	2 pts for 50% or higher 1 pt for 25%-50%	

CoC PARTICIPATION

12. Attended majority of monthly Coalition meetings (CoC Summary Report, Table 9)	Yes – 2 points No – 0 points	
13. Attended the annual HMIS and CE tool training (CoC Summary Report, Table 11)	Yes – 2 points No – 0 points	
14. Attended majority of CE Planning meetings (CoC Summary Report, Table 12)	Yes – 2 points No – 0 points	

Total Points Awarded:

Total Points Available: 32

Reviewer's Comments:

Reviewer: _____

Date: _____

Data Sources

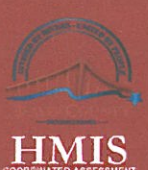
* Housing & Urban Development, *Cost Association with First Time Homelessness For Families and Individuals*, 2010

CoC Summary Report includes data from: HMIS; 2017 Systems Performance Measures Report; program's most recently submitted Annual Progress Reports; 2018 Technical Assistance & Review monitoring; and meeting sign-in sheets

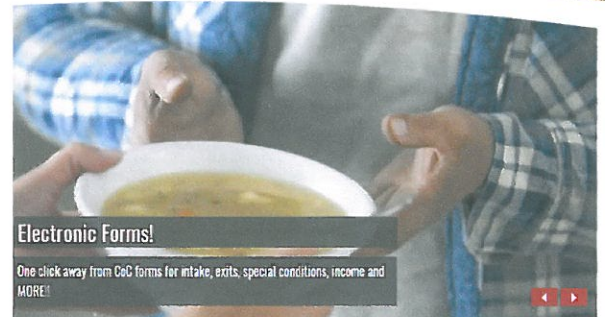
2018 Priority Listing – Ranking Criteria & Process Public Posting

Beaver County HMIS

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Home
Forms
Resources
Coalition Meeting Minutes
Steering Committee
HMIS News
Contact Us



Electronic Forms!

One click away from CoC forms for intake, exits, special conditions, income and MORE!

HUD Releases The System Performance Measures Guide

Measuring performance is a critical aspect of improving the way Continuums of Care (CoCs) serve homeless persons. It is important for CoCs to broaden the scope of performance evaluation.

Downloads

- 2018 CoC Priority Ranking
- 2016 CoC DV Bonus
- Coordinated Entry Policies & Procedures
- Utility Wise Booklet

Type here to search

5:31 PM 9/4/2018

Welcome to Community Development

Not secure | www.beavercountypa.gov/Departments/CommunityDevelopment/default.aspx

Beaver County Pennsylvania
Divided by Rivers - United by People

Resources Courts Emergency Elected Officials Recreation & Tourism Services

You are here: Beaver County > Departments > Community Development

Community Development Home Community Services Program Help Available Programs Projects

Welcome To Community Development



Related Links

- RFP - Home4Good - Funding Opportunities
- Consolidated Plans & End of Year Reports (CAPER)
- On-Line Forms
- Staff
- 2018 CoC Priority Listing - Ranking Criteria & Process
- 2018 CDBG Application
- 2018 CDBG Application Files
- Low Income Census Tracts and Block Groups
- CDBG Information Meeting Slides
- Invitation to Bid & Proposal
- Invitation for Re-Bid
- Contact Information
- Community Development Program of Beaver County

Type here to search

10:11 AM 9/6/2018


2018 Priority Listing – Ranking Criteria & Process Public Posting

CoC Application Narrative Responses (Compatibility Mode) - Word


Beaver County Official Site

Not secure | www.beavercountypa.gov/Pages/Default.aspx


Welcome to Beaver County



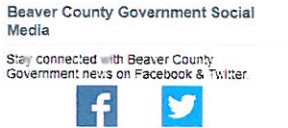
County Multi-Year Financial Plan
Please click the link below to access the County (PFM) Multi-Year Financial Plan:
[County PFM Plan](#)



Happy Days Car Chase in Beaver




OFFICE SPACE FOR RENT
Beaver County is seeking a tenant to rent office space on the 1st Floor of the HS Building, 1030 8th Ave., Beaver Falls, Pa 15010. The space is roughly 1600 square feet and 5 rooms. Rent is \$2,000/month and includes water, sewer, electric, garbage, and gas utilities. Call 724-770-4471 or click [HERE](#) for more info.




Beaver County Government Social Media
Stay connected with Beaver County Government news on Facebook & Twitter.

[Facebook](#) [Twitter](#)



Pay County Property Taxes Online
The Treasurer's Office now offers an online service to "Pay County Property Taxes". click below to make an online payment:
[Pay Property Taxes Online](#)



GIS Online Search
GIS (Geographic Information Systems) is provided by Beaver County to view parcel information. There is also an order form to request data.
[Search Now >](#)

Quick Links

- [Waste Management Free Paper Shred Day](#)
- [Bids and Proposals](#)
- [Employment Opportunities](#)
- [2018 Beaver County Government Directory](#)
- [Appointed Boards Consideration Request Form](#)
- [County Park Physical Improvement Donation Policy](#)
- [RFP - Home4Good - Funding Opportunities](#)
- [Prescription Drug Take Back Locations](#)
- [2018 CoC Priority Listing - Ranking Criteria & Process](#)

Type here to search

10:18 AM 9/6/2018

24. CoC Funding Reallocation Policy

The Steering Committee is responsible for making an annual decision regarding the option of reallocating CoC funding from underperforming projects. This annual decision is based on the informed recommendation of the CoC Coordinator at the Steering Committee meeting preceding HUD's announcement of the CoC Program Competition NOFA for that year. The CoC Coordinator will analyze the Technical Assistance Review scores, Annual Progress Reports outcomes, cost effectiveness, while considering local needs, and other special circumstances as warranted in order to make this recommendation.



Dina Ciabattoni <ciabatttonidina@gmail.com>

Rank & Review

1 message

Dina Ciabattoni <ciabatttonidina@gmail.com>

Wed, Aug 29, 2018 at 7:53 AM

To: Jaime Kinkead <Jaime.Kinkead@use.salvationarmy.org>, Darcy Casey <darcycasey@att.net>, Renee Speaker <hacbspeaker@comcast.net>, Marcelle Scott <msscott@crscares.org>, Marie Timpano <mtimpano@cornerstonebeaver.org>, Lisa Kessler <hacblk@comcast.net>, Cathy Smith <csmith@beavercountypa.gov>, Lisa Signore <lsignore@beavercountypa.gov>

Hello all,

Thank you for your applications and renewals for the 2018 CoC Competition. The Rank & Review subcommittee met last week to review your applications and have created the 2018 Priority Listing. Please find it attached. Also I attached an explanation of the Rank & Review process and the criteria used.

Please let me know if you have any questions. And thank you again for your hard work on putting your applications together!

Dina Ciabattoni, LSW

Continuum of Care Coordinator of Beaver County

Phone: 724.846.6400 ext. 15

2 attachments**2018 Priority Listing - public posting.docx**

19K

**2018 Rank & Review Criteria and Process.docx**

18K

FY 2018
CoC Consolidated Application
PA-603 Project Ranking

Annual Renewal Demand: \$1,283,884

Tier 1 Amount: \$1,206,851

Tier 2 Amount: \$77,069.76

Permanent Housing Bonus: \$142,294

DV Bonus: \$237,157

Planning Grant amount (NOT RANKED): \$71,147

RANK	APPLICANT NAME	PROJECT NAME	FEDERAL AWARD ID	PROJECT TYPE	COMPONENT TYPE	AMOUNT REQUESTED	AMOUNT RANKED	RUNNING TOTAL
1	The Salvation Army, a New York Corporation	FY 2018 Beaver County Friendship Homes	PA0321	RENEWAL	PH-PSH	\$202,181	\$202,181	\$202,181
2	Housing Authority of the County of Beaver	Crescent Commons 2018 Renewal	PA0602	RENEWAL	PH-PSH	\$208,422	\$208,422	\$410,603
3	Housing Authority of the County of Beaver	CARL Renewal FY 2018	PA0675	RENEWAL	PH-PSH	\$405,668	\$405,668	\$816,271
4	Zachewicz Enterprises	CRS Stone Harbour	PA0325	RENEWAL	TH	\$387,888	\$387,888	\$1,204,159
5*	Salvation Army	FY 2018 RRH Bonus		BONUS	RRH	\$142,294	\$142,294	\$1,346,453
6	Community Development Program of Beaver County	HMIS Expansion Renewal 2018	PA0642	RENEWAL	HMIS	\$46,000	\$46,000	\$1,392,453
7	The Cornerstone of Beaver County	2018 CoC Coordinated Entry	PA0754	RENEWAL	SSO-CE	\$33,725	\$33,725	\$1,426,178
8	Housing Authority of Beaver County	Safely Home		DV BONUS	RRH	\$221,778	\$221,778	\$1,647,956
Not Ranked	Collaborative Applicant - County of Beaver	PA-603 CoC Planning Application FY 2017	N/A	RENEWAL	CoC Planning Project Application	\$71,147	\$71,147	\$1,719,103

* This project splits Tier 1 and Tier 2. Of the project's total request, \$2,692 is in Tier 1 and \$139,602 is in Tier 2.

2018 CoC Rank & Review Criteria and Process

Rank & Review Criteria & Process

The Rank & Review subcommittee is responsible for selecting bonus projects to apply for funding and for ranking all of the applications for funding priority. Our Rank & Review subcommittee was made up of stakeholders representing various perspectives in our CoC including: job training; housing and homeless expertise; child welfare; and regional housing and homelessness. First, the subcommittee was charged with selecting the bonus projects. The criteria used to select the bonus project included: population to be served, severity of needs to be addressed, projected positive housing outcomes, cost effectiveness, and agency capacity.

All of the project applications (including renewals and the two new bonus projects) were due in e-snaps on 8/8/18. A week before the Rank & Review meeting, the reviewers received packets for each of the applicants. The packets included:

- Project applications
- CoC Summary Report that included data from APRs; HMIS; Technical Assistance Review; and meeting attendance sheets
- APR narratives
- Project Scoring Tools for each project type

The reviewers then used the objective scoring tools to score each of the applications. The scoring tools reflected both our local priorities and HUD's 2018 priorities by using these measures: exit to Permanent Housing rates; collaboration with CoC partners and mainstream resources; cost effectiveness; use of housing first methods; and reducing length of time homeless as measured by return to homelessness rates.

The reviewers then met on 8/22/18. They ensured consistent understanding of the measures, and discussed their scores and rationale. The scores were then averaged to give an overall score for each project. This scoring created the foundation for the ranking. The reviewers then worked as a group to adjust the ranking in accordance with the scores and while considering HUD and local priorities as well as local needs. These considerations included:

- The critical need that our Transitional Housing meets in our CoC
- The programs that provide housing have a significant impact on ending homelessness
- Which programs meet the most need and which programs meet the most complex needs
- The unique roles of Coordinated Entry and HMIS and their impact on the CoC's systemic response

As a result of this objective scoring and consideration of local needs, the Rank & Review committee created the 2018 Priority Listing which will be submitted to HUD with the 2018 CoC Consolidated Application.

Any questions about the Review & Rank process should be directed to Dina Ciabattone at:
ciabattoneidina@gmail.com



Dina Ciabattoni <ciabatttonidina@gmail.com>

Your RRH proposal

1 message

Dina Ciabattoni <ciabatttonidina@gmail.com>

Fri, Jun 22, 2018 at 12:41 PM

To: E Hopping <EHopping@use.salvationarmy.org>, Jaime Kinkead <Jaime.Kinkead@use.salvationarmy.org>

Major Hopping and Jaime,

Thank you for your RRH proposal in the 2018 CoC Competition. Your proposal received the most points so you have been selected to submit an application in the 2018 CoC Competition. Congratulations!

The attached letter has further details. I will be reaching out with more details regarding the competition as the timeline is developed. Please let me know if you have any questions.

Thanks again and know that we are excited to work with you on this new project.

Dina Ciabattoni, LSW

Continuum of Care Coordinator of Beaver County

Phone: 724.846.6400 ext. 15

**SA - CoC Competition Letter.pdf**

268K

June 22, 2018

To: Major Hopping and Jaime Kinkead, Beaver Falls Salvation Army

From: Dina Ciabattoni, PA-603 CoC Coordinator

Re: 2018 Continuum of Care Program Competition

Dear Major Hopping and Jaime,

On behalf of the Community Development Program, I thank you for your Rapid Rehousing proposal submission in the 2018 Continuum of Care Program Competition. The CoC Rank & Review subcommittee, has reviewed and scored the proposals based on the requirements outlined in the Request For Proposals. Your proposal received the highest score and has been selected to apply for the Permanent Housing Bonus in the 2018 CoC Competition.

HUD has not yet announced the amount of the bonus, but we will notify you immediately once they do so you can adjust your proposal accordingly. Your application will be due in e-snaps around the middle of August. I will confirm the actual date it is due as soon as the competition timeline is established. Please know I am available to assist you with any questions you may have on your application.

The Salvation Army has been a valued and significant partner for many years in our work to end homelessness in Beaver County. We look forward to being able to continue and enhance our work together. We thank you for your commitment and leadership in this important work.

If you have any questions, please contact me directly at ciabattondina@gmail.com.

Sincerely,



Dina Ciabattoni, LSW
PA-603 Continuum of Care Coordinator



Dina Ciabattoni <ciabatttonidina@gmail.com>

Your RRH proposal

1 message

Dina Ciabattoni <ciabatttonidina@gmail.com>

Fri, Jun 22, 2018 at 12:40 PM

To: Marie Timpano <mtimpano@cornerstonebeaver.org>

Marie,

Thank you for your RRH proposal in the 2018 CoC Competition. Unfortunately, your proposal did not score high enough to be selected. Please see the attached letter for more details. And do not hesitate to contact me should you have any questions.

TCBC is clearly a valued and significant partner in the work to end homelessness in Beaver County. We appreciate that you applied for this opportunity and we encourage to apply again in future competitions.

Thank you for all you and the TCBC team do to address homelessness every day.

Dina Ciabattoni, LSW

Continuum of Care Coordinator of Beaver County

Phone: 724.846.6400 ext. 15

**TCBC - CoC Competition Letter.pdf**

213K

June 22, 2018

To: Marie Timpano, Executive Director of The Cornerstone of Beaver County

From: Dina Ciabattoni, PA-603 CoC Coordinator

Re: 2018 Continuum of Care Program Competition

Dear Marie,

On behalf of the Community Development Program, I thank you for your Rapid Rehousing proposal submission in the 2018 Continuum of Care Program Competition.

The CoC Rank & Review subcommittee, reviewed the proposals and objectively scored each based on the requirements outlined in the Request For Proposals. Unfortunately, your proposal did not score high enough to be selected. The main reason for this was a lack of sufficient detail particularly in these areas:

- Target population
- Project design
- Outcomes
- Experience with managing federal grants

TCBC is a valued and significant partner in the work to end homelessness in Beaver County. We thank you for this proposal and for your daily contributions to ensuring a home for all.

If you have any questions, please contact me directly at ciabattondina@gmail.com.

Sincerely,

A handwritten signature in blue ink that reads "Dina Ciabattoni". The signature is fluid and cursive, with the first name "Dina" and last name "Ciabattoni" clearly distinguishable.

Dina Ciabattoni, LSW
PA-603 Continuum of Care Coordinator



Dina Ciabattoni <ciabatttonidina@gmail.com>

NOFA and Renewals

1 message

Dina Ciabattoni <ciabatttonidina@gmail.com>

Tue, Jul 3, 2018 at 4:48 PM

To: Marcelle Scott <mscott@crscares.org>, Jaime Kinkead <Jaime.Kinkead@use.salvationarmy.org>, Renee Speaker <hacbspeaker@comcast.net>, Darcy Casey <darcycasey@att.net>

Hello all,

I am still working my way through the NOFA but I wanted to at least get your renewal due date to you. **I would like your renewal applications to be ready in e-snaps on Aug 8th.** This will give us a week to make any edits before I print them for the Rank & Review Committee.

And just a reminder of some things that you could start addressing now:

- securing your match funds and letter. Be sure the letter includes the dates the grant will be spent (so for this grant it would 2019-2020), and it states that the match will be spent on eligible costs.
- Review and update your Applicant Profile in e-snaps. Make sure any documents you might need to upload are dated between 5/1/2018-9/1/2018.

I will send you more information to consider as I get through the NOFA.

Thanks and have a great 4th of July!!

Dina Ciabattoni, LSW

Continuum of Care Coordinator of Beaver County
Phone: 724.846.6400 ext. 15



Dina Ciabattoni <ciabatttonidina@gmail.com>

CoC project renewals

1 message

Dina Ciabattoni <ciabatttonidina@gmail.com>

Tue, Jul 3, 2018 at 4:56 PM

To: Cathy Smith <csmith@beavercountypa.gov>, Lisa Signore <lsignore@beavercountypa.gov>, Marie Timpano <mtimpano@cornerstonebeaver.org>

Hello all,

I wanted to let you know that the project applications (renewals) are due in e-snaps on August 8th. I assume this means that Marie will be doing the Coordinated Entry renewal this year. Marie, I will work with you on getting set up in e-snaps and working through the renewal.

As for the other project renewals, I can do the Planning application again this year. As for HMIS, I think I did it last year. Let me know if you'd like me to do it again.

Otherwise, I'll be reaching out with other details as we move through this process.

Happy 4th of July!!

Dina Ciabattoni, LSW

Continuum of Care Coordinator of Beaver County

Phone: 724.846.6400 ext. 15



Dina Ciabattoni <ciabatttonidina@gmail.com>

Rank & Review

1 message

Dina Ciabattoni <ciabatttonidina@gmail.com>

Wed, Aug 29, 2018 at 7:53 AM

To: Jaime Kinkead <Jaime.Kinkead@use.salvationarmy.org>, Darcy Casey <darcycasey@att.net>, Renee Speaker <hacbspeaker@comcast.net>, Marcelle Scott <msscott@crscares.org>, Marie Timpano <mtimpano@cornerstonebeaver.org>, Lisa Kessler <hacblk@comcast.net>, Cathy Smith <csmith@beavercountypa.gov>, Lisa Signore <lsignore@beavercountypa.gov>

Hello all,

Thank you for your applications and renewals for the 2018 CoC Competition. The Rank & Review subcommittee met last week to review your applications and have created the 2018 Priority Listing. Please find it attached. Also I attached an explanation of the Rank & Review process and the criteria used.

Please let me know if you have any questions. And thank you again for your hard work on putting your applications together!

Dina Ciabattoni, LSW

Continuum of Care Coordinator of Beaver County

Phone: 724.846.6400 ext. 15

2 attachments**2018 Priority Listing - public posting.docx**

19K

**2018 Rank & Review Criteria and Process.docx**

18K

GOVERNANCE CHARTER
THE BEAVER COUNTY STEERING COMMITTEE
CONTINUUM OF CARE PA-603

The Governance Charter of the Beaver County Steering Committee include the responsibilities of the organization and its policies and procedures.

Organization

Name: The name of the committee is the Beaver County Continuum of Care Steering Committee (hereinafter referred to as the "Steering Committee").

Purpose:

The Steering Committee serves as the HUD-designated primary decision-making group and oversight board of the Collaborative Applicant for the Beaver County Continuum of Care PA-603 (hereinafter referred to as the "CoC").

As the oversight board of the CoC, the Steering Committee and its members:

1. Ensure the CoC is meeting all the responsibilities assigned to it by HUD regulations (see below);
2. Represent the relevant organizations and projects serving homeless subpopulations;
3. Support homeless persons in their movement from homelessness to economic stability and affordable permanent housing within a supportive community;
4. Ensure the CoC is inclusive of all needs of Beaver County's homeless population, including the special service and housing needs of homeless sub-populations and to ensure nondiscrimination and equal opportunity in service delivery as set forth in 24 CFR 5.105(a); Facilitate responses to issues and concerns that affect the agencies funded by the CoC that are beyond those addressed in the annual CoC application process.



Responsibilities:

As the designated board of the CoC for the geographic area, the Steering Committee works with the CoC Collaborative Applicant to fulfill three major duties:

1. Operate the Continuum of Care:

- i. Hold monthly meetings of the full membership with published agendas;
- ii. Make an invitation for new members to join publicly available within the geographic area at least annually;
- iii. Adopt and follow a written process to select Steering Committee members to act on behalf of the CoC. The process must be reviewed, updated, and approved by the larger CoC membership at least once every 5 years;
- iv. Appoint committees, subcommittees, or workgroups;
- v. In consultation with the CoC Collaborative Applicant and the HMIS Lead, develop, follow, and update annually a governance charter, which will include all procedures and policies needed to comply with CoC requirements as prescribed by HUD; and a code of conduct and recusal process for the Steering Committee, its chair(s), and any person acting on behalf of the board;
- vi. Adopt and implement the orders of household prioritization in accordance with HUD CPD 16-11

GOVERNANCE CHARTER
THE BEAVER COUNTY STEERING COMMITTEE
CONTINUUM OF CARE PA-603

- vii. Consult with recipients and sub-recipients of CoC funding to establish performance targets appropriate for population and program type, monitor recipient and sub-recipient performance, evaluate outcomes, and take action against poor performers;
- viii. Evaluate outcomes of projects funded under the Beaver County Emergency Solutions Grant program (hereinafter referred to as “ESG”) and the CoC program, and report to HUD;
- ix. In consultation with recipients of CoC and ESG funds, establish, and operate a coordinated entry system that provides an initial comprehensive assessment of the needs of individuals and families for housing and services;
- x. In consultation with recipients of CoC and ESG funds within the geographic area, establish and consistently follow written standards for providing CoC assistance. At a minimum, these written standards must include:
 - 1) Policies and procedures for evaluating individuals’ and families’ eligibility for CoC assistance;
 - 2) Policies and procedures for determining and prioritizing which eligible individuals and families will receive transitional housing assistance;
 - 3) Policies and procedures for determining and prioritizing which eligible individuals and families will receive rapid re-housing assistance;
 - 4) Standards for determining what percentage or amount of rent each program participant must pay while receiving rapid re-housing assistance;
 - 5) Policies and procedures for determining and prioritizing which eligible individuals and families will receive permanent supportive housing assistance; and
 - 6) When the CoC is designated a high-performing community, policies and procedures for determining and prioritizing which eligible individuals and families will receive homelessness Prevention Assistance.
- xi. In addition to this Governance Charter, maintain a CoC Policies & Procedures operating manual reflecting on-going changes to priorities, processes, and mandates. Ensure the manual is accessible to all CoC partners.

2. Designate and Operate a Homeless Management Information System (HMIS):

- i. Designate a single HMIS for the geographic area
- ii. Designate an eligible applicant to manage the CoC’s HMIS, known as the HMIS Lead
- iii. Review, revise, and approve a privacy plan, security plan, and data quality plan for the HMIS
- iv. Ensure recipients and sub-recipients of CoC & ESG funding consistently participate in HMIS;
- v. Ensure the HMIS is administered in compliance with requirements prescribed by HUD

3. Continuum of Care Planning:

The CoC must develop a plan that includes:

- i. Coordinating the implementation of a housing and service system within its geographic area that meets the needs of the homeless individuals (including unaccompanied youth) and families. At a minimum, such a system encompass the follow
 - 1) Outreach, engagement, and assessment;

GOVERNANCE CHARTER
THE BEAVER COUNTY STEERING COMMITTEE
CONTINUUM OF CARE PA-603

- 2) Shelter, housing, and supportive services;
- 3) Prevention strategies
- ii. Planning for and conducting at least biennially, a point-in-time count of homeless persons within the geographic area that meets the following requirements:
 - 1) Homeless persons who are living in a place not designed or ordinarily used as a regular sleeping accommodation for humans must be counted as unsheltered homeless persons
 - 2) Persons living in emergency shelters and transitional housing projects must be counted as sheltered homeless persons
 - 3) Other requirements established by HUD by Notice
- iii. Conducting an annual gaps analysis of the homeless needs and services available within the geographic area;
- iv. Providing information required to complete the Consolidated Plan(s) within the CoC's geographic area; Consulting with state and local government ESG program recipients (Beaver County) for allocating ESG funds and reporting on and evaluation the performance of ESG recipients and sub-recipients.

Continuum of Care Membership

The membership of the Continuum of Care is defined as those members who attend the monthly Housing and Homeless Coalition meetings, concerned citizens, members of the local ministeriums, members of workgroups and those who are experiencing homelessness. Membership is open to anyone.

Steering Committee Membership:

The Steering Committee membership consists of but is not limited to the following, with each designated role having one seat on the committee, except as otherwise indicated:

Role:

- 1. CoC Geographic Region/ESG Recipient
- 2. Homeless/Formely Homeless Person(s)
- 3. Homeless Advocate
- 4. Health Care for the Homeless
- 5. Veterans Services
- 6. Adult Probation and Parole
- 7. County Assistance Office
- 8. Behavioral Health
- 9. Children & Youth Services
- 10. Women's Center
- 11. Education/Job Training
- 12. Homeless Management Information System

Current Representative:

Beaver County
To Be Determined
Housing & Homeless Coalition
Heritage Valley Health Care System
SSVF
Director
Director
Director
Director
Director
BCRC/BVIU/JTBC representatives
HMIS Lead

GOVERNANCE CHARTER
THE BEAVER COUNTY STEERING COMMITTEE
CONTINUUM OF CARE PA-603

13. Collaborative Applicant	Beaver County
14. ESG Sub-Recipient: Shelter	Crossroads
15. ESG Sub-Recipient: Prevention & Rapid Rehousing	ESG staff
16. Public Housing Authority	Director
17. Elected Officials	County Commissioners
18. Faith Based Community	Christ's Evangelical Lutheran Church
19. Office on Aging	Director
20. Fair Housing	Fair Housing Officer
21. The Cornerstone	TC Executive Director
22. Emergency Lodging Program	Salvation Army
23. At Large Members	To Be Determined

Advisory Seats: In addition to the above roles, Steering Committee members may designate non-voting representatives to attend and participate in meetings to provide advice and expertise on particular issues.

Voting: At all meetings, business items may be decided by arriving at a consensus. If a vote is necessary, all votes shall be by voice or ballot at the will of the majority of the members serving on the Steering Committee. Each representative seat shall have one vote. No member may vote on any item that presents a real or perceived conflict of interest.

CoC Chairs: Co-chairs of their designee are responsible for scheduling meetings of the Steering Committee, ensuring that the Steering Committee meets regularly or as needed, and for setting the agenda for meetings.

Conflicts of Interest: The Beaver County CoC Steering Committee adheres to the Conflict of Interest regulations as defined by 24 CFR 578.95 in the areas of procurement, board membership, organizational conflict and other restrictions. A representative having a conflict of interest or a conflict of responsibility on any matter shall refrain from voting on such matter. Member of the Steering Committee will sign a Conflict of Interest policy annually.

Code of Conduct and Recusal Process: The implementation of a Code of Conduct for the CoC Steering Committee, inclusive of the committee members, Chair, and subcommittees, is an essential element that supports the inclusive, collaborative, and objective goals of the CoC.

1. Meetings will be held quarterly or more frequently as needed.
2. Members will provide information that is truthful and accurate.
3. Members will be respectful to others at all times.
4. Decision making process will:
 - a. Be made by majority vote at scheduled meetings or via email in timely manners.
 - c. Conflict of Interest. Members will withdraw/excuse themselves from participating in decision-making (voting) process concerning awards of grants or provisions of financial benefit to which such member or his/her organization could have a future financial interest or involvement.

**Homeless Management Information System
Beaver County Continuum of Care
Policies & Procedures**

Adopted June 1, 2009
Revised January 5, 2018

1 Introduction

This document provides the framework for the ongoing operations of the Beaver County Continuum of Care Homeless Management Information System (HMIS)

The Program Overview provides the main objectives, direction, and benefits of HMIS.

2 Program Overview

The mission of the HMIS is to be an integrated network of homeless and other service providers that use a central database to collect, track and report uniform information on client needs and services. This HMIS will not only meet Federal requirements but also enhance service planning and delivery.

The fundamental goal of HMIS is to document the demographics of homelessness in Beaver County according to the HUD HMIS Standards. It is then the goal of the program to identify patterns in the utilization of assistance and document the effectiveness of the services for the client. This will be accomplished through analysis of data that is gathered from the actual experiences of homeless persons and the service providers who assist them in shelters and homeless assistance programs throughout the county. Data that is gathered via intake interviews and program participation will be used to complete the HUD Annual Progress Reports. This data may also be analyzed to provide unduplicated counts and anonymous aggregate data to policy makers, service providers, advocates, and consumer representatives.

Coordinated Entry will also operate as a function of HMIS. The HMIS system will identify the households in need of Coordinated Entry's intensive housing support.

These policies and procedures will comply with all applicable Federal law and regulations, and applicable state or local government requirements, as established in 24 CFR 580.31.

The program utilizes a web-enabled application residing on a central server to facilitate data collection by homeless service organizations across the county. Access to the central server is limited to agencies formally participating in the program and then only authorized staff members who meet the necessary training and security requirements.

Potential benefits for homeless and nearly homeless men, women, and families: Service coordination can be improved when information is shared among case management staff within one agency or with staff in other agencies (with written client consent) who are serving the same clients.

Potential benefits for agencies and program managers:

Aggregated information can be used to develop a more complete understanding of clients' needs and outcomes. Information can be used to advocate for additional resources, complete grant applications, conduct evaluations of program services, and report to funding agencies such as HUD.

Potential benefits for community-wide Continuums of Care and policy makers:

County-wide involvement in the program provides the capacity to generate HUD annual Progress Reports for the Continuums of Care. Allows access to aggregate information both at the local and regional level that will assist in identification of gaps in services. Completion of other service reports used to inform policy decision aimed at addressing and ending homelessness at local, state, and federal levels.

3 Governing Principles

Described below are the overall governing principles upon which all decisions pertaining to HMIS are based.

Participants are expected to read, understand, and adhere to the spirit of these principles, even when the Policies and Procedures do not provide specific direction.

Confidentiality

All partnering agencies will be required to execute a confidentiality agreement with HMIS.

The rights and privileges of clients are crucial to the success of HMIS. These policies will ensure clients' privacy without impacting the delivery of services, which is the primary focus of agency programs participating in this program.

Policies regarding client data are founded on the premise that a client owns his/her own personal information and provide the necessary safeguards to protect client, agency, and policy level interests. Collection, access, and disclosure of client data through HMIS will only be permitted by the procedures set forth in this document.

Data Integrity

Client data is the most valuable and sensitive asset of HMIS. These policies will ensure integrity and protect this asset from accidental or intentional unauthorized modification, destruction, or disclosure.

System Availability

The availability of a centralized data repository is necessary to achieve the ultimate countywide aggregation of unduplicated homeless statistics. The System Administrator is responsible for ensuring the broadest deployment and availability for homeless

service agencies in Beaver County, PA.

Compliance

Violation of the policies and procedures set forth in this document will have serious consequences. Any deliberate or unintentional action resulting in a breach of confidentiality or loss of data integrity will result in the withdrawal of system access for the offending entity.

4 Roles and Responsibilities



HMIS Administrator

- Selection and Procurement of Server Hardware
- Hosting Facility Agreement
- Domain Registration
- Procurement of Server Software and Licenses
- End User Licensee (First 2 years)
- Creation of Program Forms And Documentation
- Program Website
- Program Policies And Procedures And Compliance
- General Responsibility For Program Rollout
- Central Server Administration
- Server Security, Configuration, And Availability Setup And Maintenance Of Hardware
 - Set-up and Maintenance Of Software
 - Installation and Maintenance of Software
 - Configuration of Network and Security Layers
 - Anti-virus Protection for Server Configuration
 - System Backup and Disaster Recovery
- Keeper Of Signed Memorandums Of Understanding
- User Administration
- Add And Remove Partner Agency Technical Administrators
- Manage User Licenses
 - System Uptime And Performance Monitoring
 - Ongoing Protection Of Confidential Data
- Troubleshoot for end-users, ensuring that participants are able to generate accurate reports.
- Coordinate ongoing HMIS training from contractor.
- Inventory distribution and set-up
- Monitor Compliance with applicable HMIS standards.

- Coordination of on-going training.
- Share data with interested parties

Agency End-Users

- Each Partner Agency is responsible for ensuring they meet the Privacy and Security requirements detailed in the HUD HMIS Data and Technical Standards. Annually, Partner Agencies will conduct a thorough review of internal policies and procedures regarding HMIS.
- Safeguard Client Privacy Through Compliance With Confidentiality Policies
- Data Collections as Specified by Training and Other Documentation

5 OPERATING PROCEDURES

5.1 *Program Participation*

Policies

- Agencies participating in HMIS shall commit to abide by the governing principles of HMIS and adhere to the terms and conditions of this partnership as detailed in the Memorandum of Understanding.

Procedures

Confirm Participation

- The Partner Agency shall confirm their participation in HMIS by submitting a Memorandum of Understanding to the HMIS System Administrator.
- The HMIS System Administrator will maintain a file of all signed Memorandums of Understanding.

Terminate Participation Voluntary

- The Partner Agency shall inform the HMIS System Administrator in writing of their intention to terminate their agreement to participate in HMIS.
- The HMIS System Administrator will inform the Technical Committee and update the Participating Agency List.
- The HMIS System Administrator will revoke access of the Partner Agency staff to HMIS. Note: All Partner Agency-specific information contained in the HMIS SCC system will remain in the HMIS system.
- The HMIS System Administrator will keep all termination records on file with the

associated Memorandums of Understanding.

Site Security Assessment

- Prior to allowing access to HMIS, the System Administrator and the Agency Director will meet to review and assess the security measures in place to protect client data.
- Partner Agencies shall have virus protection software on all computers that access HMIS.

5.2 User Authorization & Passwords

Policies

- Partner Agency staff participating in HMIS shall commit to abide by the governing principles of HMIS and adhere to the terms and conditions of the Partner Agency User Agreement.
- The Partner Agency must only request user access to HMIS for those staff members that require access to perform their job duties.
- All users must have their own unique user ID and should never use or allow use of a user ID that is not assigned to them (see Partner Agency User Agreement).
- User-specific passwords should never be shared and should never be communicated in any format. ~
- New user ID's must require password change on first use.
- Passwords must consist of at least 8 characters and must contain a combination of letters and numbers (no special characters; alpha and numeric only). Passwords must be changed every 45 days. If they are not changed within that time period, they will expire and the user will be locked out of the system.
- Three consecutive unsuccessful attempts to login will disable the User ID until the account is reactivated by the HMIS System Administrator.
- Background checks are performed on all HMIS users as well as new users that are given access to the system.

Procedures

Workstation Security Assessment

- Prior to requesting user access for any staff member, the Partner Agency Technical Administrator will assess the operational security of the user's workspace.
- Partner Agency Technical Administrator will confirm that workstation has virus

protection properly installed and a full-system scan has been performed within the last week.

- Partner Agency Technical Administrator will confirm that workstation has and uses a hardware or software firewall.

Request New User ID

- When the Partner Agency Technical Administrator identifies a staff member that requires access to HMIS SCC, a Partner Agency User Agreement (PAUA) will be provided to the prospective user.
- The prospective user must read, understand and sign the PAUA and return it to the Partner Agency Technical Administrator.
- The Partner Agency Technical Administrator will co-sign the PAUA and keep it on file.
- The Partner Agency Technical Administrator will create the new user ID as specified and notify the user ID owner of the temporary password via email.

Change User Access

- When the Partner Agency Technical Administrator determines that it is necessary to change a user's access level, the Partner Agency Technical Administrator will update the user ID as needed.

Rescind User Access

Voluntary

Use this procedure when any HMIS user leaves the agency or otherwise becomes inactive.

- The Partner Agency Technical Administrator will deactivate staff user IDs.
- The HMIS System Administrator will deactivate all other user IDs.

Compliance Failure:

Use this procedure when any HMIS user breaches the PAUA, or violates the Policies and Procedures, or breaches confidentiality or security.

- The Partner Agency Technical Administrator will deactivate staff user IDs.
- The HMIS System Administrator will deactivate all other user IDs.

Reset Password

- When a user forgets his or her password or has reason to believe that someone else has gained access to their password, they must immediately notify their Partner Agency Technical Administrator.
- The Partner Agency Technical Administrator will reset the user's password and notify the user of the new temporary password.

5.3 Collection and Entry of Client Data

Policies

- Client data will be gathered according to the policies, procedures, and confidentiality rules of each individual program.
- Client data may only be entered into HMIS with client's authorization to do so.
- All universal and program data elements from the HUD HMIS Data and Technical Standards Final Draft should be collected, subject to client consent.
- Client data will only be shared with Partner Agencies if the client consents, has signed the Client Consent form and the signed Client Consent form is available on record.
- Client data will be entered into HMIS in a timely manner, no later than the 5th of every month.
- All client data entered into HMIS will be kept as accurate and as current as possible.
- Hard copy or electronic files will continue to be maintained according to individual program requirements and according to the HUD HMIS Data and Technical Standards Final Draft.
- No data may be imported without the client's authorization.
- Any authorized data imports will be the responsibility of the Partner Agency.
- Partner Agencies are responsible for the accuracy, integrity, and security of all data input by said Agency.
- Our Continuum of Care is committed to entering client specific data into HMIS that is accurate, complete, and timely to ensure quality of data, and to provide reports to agency executive management, public policy decision makers, and all participating homeless service and housing providers.
- Data quality of client specific data is essential to the meaningful analysis and

accurate reporting of Continuums of Care data.

- Data quality shall be a concern of highest importance and all members of Continuums of Care will work to continuously improve quality.
- Quality assurance shall be the ultimate responsibility of each Partner Agency's Executive Director. The System Administrator will provide Reports at the request of any partner agency.
- Each Partner Agency that comes in contact with a client has an opportunity to improve data quality and should make every effort to do so when that opportunity arises.
- HMIS will decide on a plan to dispose of (or remove identifiers from) client data seven (7) years after it was created or last changed.

5.4 Release and Disclosure of Client Data

Policies

- Client specific data from HMIS may be shared with Partner Agencies only when the agency has secured a valid Release of Information from that client authorizing such sharing and only during such time that Release of Information is valid (before its expiration). Other non-HMIS inter-agency agreements do not cover the sharing of HMIS data.
- Sharing of client data may be limited by program specific confidentiality rules.
- No client-specific data will be released or shared outside of the Partner Agencies unless the client gives specific written permission or unless withholding that information would be illegal (see Release of Information). Note that services may NOT be denied if client refuses to sign Release of Information or declines to state any information.
- Release of Information must constitute INFORMED consent. The burden rests with the intake counselor to inform the client before asking for consent. As part of informed consent, a notice must be posted explaining the reasons for collecting the data, the client's rights, and any potential future uses of the data. An example of such a sign for posting may be found at www.hmisscc.org under Forms.
- Client shall be given print out of all data relating to them upon written request and within 10 working days.
- A report of data sharing events, including dates, agencies, persons, and other details, must be made available to the client upon request and within 10 working days.
- A log of all external releases or disclosures must be maintained for seven years and made available to the client upon written request and within 10 working days.
- Aggregate data that does not contain any client specific identifying data may be shared with internal and external agents without specific permission. This policy

- should be made clear to clients as part of the Informed Consent procedure.
- Each Partner Agency Executive Director is responsible for his or her agency's internal compliance with the HUD Data Standard.

Procedures

- Procedures for disclosure of client-specific data are readily obtained from the above policies, combined with the configuration of HMIS, which facilitates appropriate data sharing.

5.5 Server Security

Policies

- The HMIS System Administrator will strive to secure and keep secure the servers, both physically and electronically.

Procedures

- All procedures for maximizing Server Security are the responsibility of the HMIS System Administrator.

5.6 Server Availability

Policies

- The HMIS Administrator will strive to maintain continuous availability by design and by practice.
- Necessary and planned downtime will be scheduled when it will have least impact, for the shortest possible amount of time, and will only come after timely communication to all participants.
- The HMIS Administrator is responsible for design and implementation of a backup and recovery plan (including disaster recovery).

Procedures

- A user should immediately report unplanned downtime to his or her Partner Agency Technical Administrator.
- All other procedures for maximizing server availability, recovering from unplanned downtime, communicating, and avoiding future downtime are the responsibility of the HMIS Administrator.
- The HMIS Administrator will backup system, software, and database data on a weekly basis, as well as incremental backups nightly.

5.7 Workstation Security

Policies

- The Partner Agency Technical Administrator is responsible for preventing degradation of the whole system resulting from viruses, intrusion, or other factors under the agency's control.
- The Partner Agency Technical Administrator is responsible for preventing inadvertent release of confidential client-specific information. Such release may come from physical or electronic or even visual access to the workstation, thus steps should be taken to prevent these modes of inappropriate access (that is, don't let someone read over your shoulder and lock your screen).
- All workstations to be used with HMIS must be secured with a firewall between the workstation and the internet. Software firewalls are acceptable.
- Recommended Internet connection: DSL or Cable Modems at least 128 Kbits.
- Recommended Browser: latest release of Internet Explorer version 6.
- Definition and communication of all procedures to all Partner Agency users for achieving proper agency workstation configuration and for protecting their access by all Agency users to the wider system are the responsibility of the Partner Agency Technical Administrator.

Procedures

1. At a minimum, any workstation accessing the central server shall have anti-virus software with current virus definitions (24 hours) and frequent full-system scans (weekly).

5.8 Training

Policies

- The HMIS System Administrator shall obtain a written commitment form Partner Agencies to participate in local HMIS Trainings, as specified in the Memorandum of Understanding.

Procedures

Start-up Training:

HMIS will provide training in the following areas prior to the Partner Agency.

- End user training.
- Confidentiality Training.

Follow-up Training:

HMIS will provide on-site follow-up training at each participating Partner Agency. Once the Partner Agency has “gone live,” the HMIS the System Administrator will make on-site visits as needed to ensure that the Partner Agency becomes proficient in the use of HMIS.

On-going Training:

HMIS will provide regular training for the Continuum of Care, as needed. The areas covered will be:

- End User Training
- Confidentiality Training
- Annual refresher training
- Technical Assistance for Partner Agencies as needed.

Additional training classes will be scheduled as needed.

5.9 Compliance

- Compliance with these Policies and Procedures is mandatory for participation in HMIS.
- Using the PA HMIS software all changes to client data are recorded and will be periodically and randomly audited for compliance.
- Each Partner Agency is responsible for ensuring they meet the Privacy and Security requirements detailed in the HUD HMIS Data and Technical Standards. Annually, Partner Agencies will conduct a thorough review of internal policies and procedures regarding HMIS.

5.10 Technical Support

- Support requests include problem reporting, requests for enhancements (features), or other general technical support should be submitted to the HMIS System Administrator.
- Users shall not, under any circumstances, submit requests to software vendor.

5.11 Changes to This and Other Documents

Policies

HMIS staff will guide the compilation and amendment of these Policies and Procedures.

Procedures

Changes to Policies & Procedures

1. Proposed changes may originate from any participant in HMIS.
2. When proposed changes originate within a Partner Agency, they must be submitted to the HMIS System Administrator for review and discussion.
3. HMIS System Administrator will maintain a list of proposed changes.

6.1 HUD HMIS Data and Technical Standards

This document should, at a minimum, reflect the baseline requirements listed in the Proposed Rules 24 CFR 580, established 12/9/2011. Users of HMIS are required to read and comply with the HMIS Data and Technical Standards. Failure to comply with these standards carries the same consequences as doe's failure to comply with these Policies and Procedures. In any instance, where these Policies and Procedures are not consistent with the HMIS Standards from HUD, the HUD Standards take precedence. Should any inconsistencies be identified, notice should be made to the System Administrator of HMIS.

6.2 HIPAA

For agencies or programs where HIPAA applies, HIPAA requirements take precedence over both the HUD HMIS.

2018 HDX Competition Report

PIT Count Data for PA-603 - Beaver County Coc

Total Population PIT Count Data

	2016 PIT	2017 PIT	2018 PIT
Total Sheltered and Unsheltered Count	131	98	117
Emergency Shelter Total	71	66	79
Safe Haven Total	0	0	0
Transitional Housing Total	54	22	32
Total Sheltered Count	125	88	111
Total Unsheltered Count	6	10	6

Chronically Homeless PIT Counts

	2016 PIT	2017 PIT	2018 PIT
Total Sheltered and Unsheltered Count of Chronically Homeless Persons	8	12	3
Sheltered Count of Chronically Homeless Persons	5	5	0
Unsheltered Count of Chronically Homeless Persons	3	7	3

2018 HDX Competition Report PIT Count Data for PA-603 - Beaver County CoC

Homeless Households with Children PIT Counts

	2016 PIT	2017 PIT	2018 PIT
Total Sheltered and Unsheltered Count of the Number of Homeless Households with Children	22	18	15
Sheltered Count of Homeless Households with Children	22	17	15
Unsheltered Count of Homeless Households with Children	0	1	0

Homeless Veteran PIT Counts

	2011	2016	2017	2018
Total Sheltered and Unsheltered Count of the Number of Homeless Veterans	4	1	2	4
Sheltered Count of Homeless Veterans	4	0	2	3
Unsheltered Count of Homeless Veterans	0	1	0	1

2018 HDX Competition Report

HIC Data for PA-603 - Beaver County Coc

HMIS Bed Coverage Rate

Project Type	Total Beds in 2018 HIC	Total Beds in 2018 HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter (ES) Beds	101	22	79	100.00%
Safe Haven (SH) Beds	0	0	0	NA
Transitional Housing (TH) Beds	38	10	28	100.00%
Rapid Re-Housing (RRH) Beds	18	0	18	100.00%
Permanent Supportive Housing (PSH) Beds	153	0	153	100.00%
Other Permanent Housing (OPH) Beds	0	0	0	NA
Total Beds	310	32	278	100.00%

2018 HDX Competition Report

HIC Data for PA-603 - Beaver County CoC

PSH Beds Dedicated to Persons Experiencing Chronic Homelessness

Chronically Homeless Bed Counts	2016 HIC	2017 HIC	2018 HIC
Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homeless persons identified on the HIC	111	95	95

Rapid Rehousing (RRH) Units Dedicated to Persons in Household with Children

Households with Children	2016 HIC	2017 HIC	2018 HIC
RRH units available to serve families on the HIC			2

Rapid Rehousing Beds Dedicated to All Persons

All Household Types	2016 HIC	2017 HIC	2018 HIC
RRH beds available to serve all populations on the HIC			18

2018 HDX Competition Report

FY2017 - Performance Measurement Module (Sys PM)

Summary Report for PA-603 - Beaver County CoC

For each measure enter results in each table from the System Performance Measures report generated out of your CoCs HMIS System. There are seven performance measures. Each measure may have one or more "metrics" used to measure the system performance. Click through each tab above to enter FY2017 data for each measure and associated metrics.

RESUBMITTING FY2017 DATA: If you provided revised FY2017 data, the original FY2017 submissions will be displayed for reference on each of the following screens, but will not be retained for analysis or review by HUD.

ERRORS AND WARNINGS: If data are uploaded that creates selected fatal errors, the HDX will prevent the CoC from submitting the System Performance Measures report. The CoC will need to review and correct the original HMIS data and generate a new HMIS report for submission.

Some validation checks will result in warnings that require explanation, but will not prevent submission. Users should enter a note of explanation for each validation warning received. To enter a note of explanation, move the cursor over the data entry field and click on the note box. Enter a note of explanation and "save" before closing.

Measure 1: Length of Time Persons Remain Homeless

This measures the number of clients active in the report date range across ES, SH (Metric 1.1) and then ES, SH and TH (Metric 1.2) along with their average and median length of time homeless. This includes time homeless during the report date range as well as prior to the report start date, going back no further than October, 1, 2012.

Metric 1.1: Change in the average and median length of time persons are homeless in ES and SH projects.

Metric 1.2: Change in the average and median length of time persons are homeless in ES, SH, and TH projects.

- a. This measure is of the client's entry, exit, and bed night dates strictly as entered in the HMIS system.

2018 HDX Competition Report

FY2017 - Performance Measurement Module (Sys PM)

	Universe (Persons)			Average LOT Homeless (bed nights)				Median LOT Homeless (bed nights)			
	Submitted FY 2016	Revised FY 2016	FY 2017	Submitted FY 2016	Revised FY 2016	FY 2017	Difference	Submitted FY 2016	Revised FY 2016	FY 2017	Difference
1.1 Persons in ES and SH	339		341	118		77	-41	30		27	-3
1.2 Persons in ES, SH, and TH	408		409	149		125	-24	38		32	-6

b. This measure is based on data element 3.17.

This measure includes data from each client's Living Situation (Data Standards element 3.917) response as well as time spent in permanent housing projects between Project Start and Housing Move-In. This information is added to the client's entry date, effectively extending the client's entry date backward in time. This "adjusted entry date" is then used in the calculations just as if it were the client's actual entry date.

The construction of this measure changed, per HUD's specifications, between FY 2016 and FY 2017. HUD is aware that this may impact the change between these two years.

	Universe (Persons)			Average LOT Homeless (bed nights)				Median LOT Homeless (bed nights)			
	Submitted FY 2016	Revised FY 2016	FY 2017	Submitted FY 2016	Revised FY 2016	FY 2017	Difference	Submitted FY 2016	Revised FY 2016	FY 2017	Difference
1.1 Persons in ES, SH, and PH (prior to "housing move in")	765		736	155		120	-35	40		42	2
1.2 Persons in ES, SH, TH, and PH (prior to "housing move in")	826		800	153		145	-8	50		51	1

2018 HDX Competition Report

FY2017 - Performance Measurement Module (Sys PM)

Measure 2: The Extent to which Persons who Exit Homelessness to Permanent Housing Destinations Return to Homelessness

This measures clients who exited SO, ES, TH, SH or PH to a permanent housing destination in the date range two years prior to the report date range. Of those clients, the measure reports on how many of them returned to homelessness as indicated in the HMIS for up to two years after their initial exit.

After entering data, please review and confirm your entries and totals. Some HMIS reports may not list the project types in exactly the same order as they are displayed below.

	Total # of Persons who Exited to a Permanent Housing Destination (2 Years Prior)		Returns to Homelessness in Less than 6 Months		Returns to Homelessness from 6 to 12 Months		Returns to Homelessness from 13 to 24 Months		Number of Returns in 2 Years	
	Revised FY 2016	FY 2017	Revised FY 2016	FY 2017	% of Returns	Revised FY 2016	FY 2017	% of Returns	FY 2017	% of Returns
Exit was from SO		0		0			0		0	
Exit was from ES		67		13	19%		8	12%	29	43%
Exit was from TH		18		0	0%		2	11%	4	22%
Exit was from SH		0		0			0		0	
Exit was from PH		118		3	3%		6	5%	15	13%
TOTAL Returns to Homelessness		203		16	8%		16	8%	48	24%

Measure 3: Number of Homeless Persons

Metric 3.1 – Change in PIT Counts

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2018 HDX Competition Report

FY2017 - Performance Measurement Module (Sys PM)

This measures the change in PIT counts of sheltered and unsheltered homeless person as reported on the PIT (not from HMIS).

	January 2016 PIT Count	January 2017 PIT Count	Difference
Universe: Total PIT Count of sheltered and unsheltered persons	131	98	-33
Emergency Shelter Total	71	66	-5
Safe Haven Total	0	0	0
Transitional Housing Total	54	22	-32
Total Sheltered Count	125	88	-37
Unsheltered Count	6	10	4

Metric 3.2 – Change in Annual Counts

This measures the change in annual counts of sheltered homeless persons in HMIS.

	Submitted FY 2016	Revised FY 2016	FY 2017	Difference
Universe: Unduplicated Total sheltered homeless persons	408		409	1
Emergency Shelter Total	339		341	2
Safe Haven Total	0		0	0
Transitional Housing Total	69		68	-1

2018 HDX Competition Report

FY2017 - Performance Measurement Module (Sys PM)

Measure 4: Employment and Income Growth for Homeless Persons in CoC Program-funded Projects

Metric 4.1 – Change in earned income for adult system stayers during the reporting period

	Submitted FY 2016	Revised FY 2016	FY 2017	Difference
Universe: Number of adults (system stayers)	60		53	-7
Number of adults with increased earned income	9		2	-7
Percentage of adults who increased earned income	15%		4%	-11%

Metric 4.2 – Change in non-employment cash income for adult system stayers during the reporting period

	Submitted FY 2016	Revised FY 2016	FY 2017	Difference
Universe: Number of adults (system stayers)	60		53	-7
Number of adults with increased non-employment cash income	15		0	-15
Percentage of adults who increased non-employment cash income	25%		0%	-25%

Metric 4.3 – Change in total income for adult system stayers during the reporting period

	Submitted FY 2016	Revised FY 2016	FY 2017	Difference
Universe: Number of adults (system stayers)	60		53	-7
Number of adults with increased total income	24		2	-22
Percentage of adults who increased total income	40%		4%	-36%

2018 HDX Competition Report

FY2017 - Performance Measurement Module (Sys PM)

Metric 4.4 – Change in earned income for adult system leavers

	Submitted FY 2016	Revised FY 2016	FY 2017	Difference
Universe: Number of adults who exited (system leavers)	75		70	-5
Number of adults who exited with increased earned income	10		7	-3
Percentage of adults who increased earned income	13%		10%	-3%

Metric 4.5 – Change in non-employment cash income for adult system leavers

	Submitted FY 2016	Revised FY 2016	FY 2017	Difference
Universe: Number of adults who exited (system leavers)	75		70	-5
Number of adults who exited with increased non-employment cash income	4		8	4
Percentage of adults who increased non-employment cash income	5%		11%	6%

Metric 4.6 – Change in total income for adult system leavers

	Submitted FY 2016	Revised FY 2016	FY 2017	Difference
Universe: Number of adults who exited (system leavers)	75		70	-5
Number of adults who exited with increased total income	14		15	1
Percentage of adults who increased total income	19%		21%	2%

2018 HDX Competition Report

FY2017 - Performance Measurement Module (Sys PM)

Measure 5: Number of persons who become homeless for the 1st time

Metric 5.1 – Change in the number of persons entering ES, SH, and TH projects with no prior enrollments in HMIS

	Submitted FY 2016	Revised FY 2016	FY 2017	Difference
Universe: Person with entries into ES, SH or TH during the reporting period.	290		313	23
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.	39		58	19
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time)	251		255	4

Metric 5.2 – Change in the number of persons entering ES, SH, TH, and PH projects with no prior enrollments in HMIS

	Submitted FY 2016	Revised FY 2016	FY 2017	Difference
Universe: Person with entries into ES, SH, TH or PH during the reporting period.	666		631	-35
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.	80		99	19
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time.)	586		532	-54

2018 HDX Competition Report

FY2017 - Performance Measurement Module (Sys PM)

Measure 6: Homeless Prevention and Housing Placement of Persons defined by category 3 of HUD's Homeless Definition in CoC Program-funded Projects

This Measure is not applicable to CoCs in FY2017 (Oct 1, 2016 - Sept 30, 2017) reporting period.

Measure 7: Successful Placement from Street Outreach and Successful Placement in or Retention of Permanent Housing

Metric 7a.1 – Change in exits to permanent housing destinations

	Submitted FY 2016	Revised FY 2016	FY 2017	Difference
Universe: Persons who exit Street Outreach	0		0	0
Of persons above, those who exited to temporary & some institutional destinations	0		0	0
Of the persons above, those who exited to permanent housing destinations	0		0	0
% Successful exits				

Metric 7b.1 – Change in exits to permanent housing destinations

2018 HDX Competition Report

FY2017 - Performance Measurement Module (Sys PM)

	Submitted FY 2016	Revised FY 2016	FY 2017	Difference
Universe: Persons in ES, SH, TH and PH-RRH who exited, plus persons in other PH projects who exited without moving into housing	539		552	13
Of the persons above, those who exited to permanent housing destinations	283		334	51
% Successful exits	53%		61%	8%

Metric 7b.2 – Change in exit to or retention of permanent housing

	Submitted FY 2016	Revised FY 2016	FY 2017	Difference
Universe: Persons in all PH projects except PH-RRH	213		189	-24
Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations	169		167	-2
% Successful exits/retention	79%		88%	9%

2018 HDX Competition Report

FY2017 - SysPM Data Quality

PA-603 - Beaver County CoC

This is a new tab for FY 2016 submissions only. Submission must be performed manually (data cannot be uploaded). Data coverage and quality will allow HUD to better interpret your Sys PM submissions.

Your bed coverage data has been imported from the HIC module. The remainder of the data quality points should be pulled from data quality reports made available by your vendor according to the specifications provided in the HMIS Standard Reporting Terminology Glossary. You may need to run multiple reports into order to get data for each combination of year and project type.

You may enter a note about any field if you wish to provide an explanation about your data quality results. This is not required.

2018 HDX Competition Report

FY2017 - SysPM Data Quality

	All ES, SH				All TH				All PSH, OPH				All RRH				All Street Outreach			
	2013-2014	2014-2015	2015-2016	2016-2017	2013-2014	2014-2015	2015-2016	2016-2017	2013-2014	2014-2015	2015-2016	2016-2017	2013-2014	2014-2015	2015-2016	2016-2017	2013-2014	2014-2015	2015-2016	2016-2017
1. Number of non-DV Beds on HIC	38	46	60	74	55	50	50	26	123	108	170	153								
2. Number of HMIS Beds	38	46	60	74	55	50	50	26	123	108	170	153								
3. HMIS Participation Rate from HIC (%)	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00								
4. Unduplicated Persons Served (HMIS)	191	318	344	438	115	77	79	72	162	242	312	283	224	244	418	535	0	0	0	0
5. Total Leavers (HMIS)	130	241	284	380	69	42	40	33	68	75	132	103	189	177	360	469	0	0	0	0
6. Destination of Don't Know, Refused, or Missing (HMIS)	19	41	99	30	16	11	8	1	3	18	26	3	15	37	70	7	0	0	0	0
7. Destination Error Rate (%)	14.62	17.01	34.86	7.89	23.19	26.19	20.00	3.03	4.41	24.00	19.70	2.91	7.94	20.90	19.44	1.49				

2018 HDX Competition Report Submission and Count Dates for PA-603 - Beaver County Coc

Date of PIT Count

Date	Received HUD Waiver
1/24/2018	

Report Submission Date in HDX

Submitted On		Met Deadline
2018 PIT Count Submittal Date	4/30/2018	Yes
2018 HIC Count Submittal Date	4/30/2018	Yes
2017 System PM Submittal Date	5/31/2018	Yes

These programs are required to have this definition in their Policies & Procedures and to include HUD standard evidence of chronic homeless status in each chronically homeless client's file.



4. CoC Orders of Prioritization

PA-603 follows the standards as set forth in Notice CDP-16-11 (Notice on Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Homeless Person in Permanent Supportive Housing). Additionally, the CoC has identified these populations as prioritized populations:

- People who are pregnant
- Veterans
- Families with 4 or more dependent children
- Families with CYS involvement
- People over the age of 60
- Head of Household who is under the age of 24 years old with a child under the age of 5 years
- Head of Household who is aged 18-22 years old and transitioning out of foster care
- People with DV status
- Unaccompanied Youth

The Governing Board will regularly review the Orders of Prioritization to ensure that they accurately reflect local needs. The CoC Coordinator will ensure that any changes to the Orders of Prioritization are reflected in the Coordinated Entry Screening Tool.

5. Non-Discrimination and Equal Opportunity

The CoC follows the nondiscrimination and equal opportunity requirements set forth in 24 CFR 5.105(a). As such housing shall be made available without regard to actual or perceived sexual orientation, gender identity, or marital status.

6. Coordinated Entry – See Coordinated Entry Policies & Procedures

The CoC will maintain Policies & Procedures for the Coordinated Entry process.

7. HMIS Expectations

All CoC funded programs, ESG, and SSVF are mandated to enter client data into HMIS. Other agencies who regularly render service to homeless individuals may enter data into HMIS as well. All HMIS users are expected to be familiar with the HMIS Policies & Procedures. In addition to those, CoC funded programs, ESG, and SSVF are expected to meet these standards:

- Central Intake Confirmation: Once a household has been entered into HMIS, the program is expected to include the confirmation in the client file.
- Coordinated Entry Confirmation: To demonstrate that programs are accepting all new referrals from Coordinated Entry, they are expected to include the CE screening in the client file.
- Services Only: To be completed when providing service (i.e.: bus tickets, referrals, gift cards etc) to a household who is not officially enrolled in a program.

PA-603 Racial Disparity Analysis

CoC PA-603 acknowledges that most minority groups in the United States experience homelessness at higher rates than Whites, and therefore make up a disproportionate share of the homeless populations. Therefore in 2018, we started to take a formal look at who our CoC serves and housing outcomes by race.

We started this process by comparing the race of people served in our homeless programs to the race composition of the general population.

Race	People Served in PSH, RRH, TH, and ES	Race in General Population*
White	57%	91%
African American	39%	6%
American Indian	.3%	0%
Mult-Race	4%	1%

We then analyzed this against the 2013 Affirmatively Furthering Fair Housing study prepared by Pennsylvania Southwestern Legal Services, Inc. This study revealed that minorities (with the greatest negative impact on African Americans) had significantly lower median incomes than Whites. The study also indicated that African Americans were 3 times more likely to be unemployed than Whites. In addition, there was a 44% decrease in affordable housing in Beaver County from 2000 to 2011. In 2018, this trend continues as evidenced by the PA Housing Alliance's study showing that only 73 units of affordable housing are available for every 100 extremely low income households.

Thus, we were not surprised to see that our homeless programs are serving a significantly higher percentage of minorities as compared to their representation in the general population. Although, there are systems addressing this greater social-economic issue in our county, our CoC is committed to ensuring equal positive housing outcomes for minority populations. Outcomes based on race will be closely monitored at the program and system levels to ensure equitable opportunity for housing stability. This deeper analysis will be reported to our Steering Committee for use in their CoC planning efforts.

* Source: 2016 American Community Survey for Beaver County, PA